

IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

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IN RE: NATIONAL PRESCRIPTION MDL No. 2804  
OPIATE LITIGATION

Case No. 17-md-2804

Judge Dan Aaron

This document relates to: Polster  
City of Cleveland v. AmerisourceBergen  
Drug Corp., et al.

Case No. 1:18-OP-45132 (N.D. Ohio)

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Videotaped deposition of
MERLE GORDON

July 19, 2018
9:15 a.m.

Taken at:
Taft Stettinius & Hollister LLP
200 Public Square, Suite 3500
Cleveland, Ohio

Renee L. Pellegrino, RPR, CLR

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| <p style="text-align: right;">Page 18</p> <p>1 THE VIDEOGRAPHER: Good morning. We</p> <p>2 are on the record. The time is 9:15. The date</p> <p>3 is July 19th, 2018. This is media unit 1 of the</p> <p>4 video recorded deposition of Merle Gordon in the</p> <p>5 matter of In Re: National Prescription Opiate</p> <p>6 Litigation, filed in U.S. District Court,</p> <p>7 Northern District of Ohio, Case Number</p> <p>8 17-md-2804. The deposition is being held at</p> <p>9 Taft Stettinius &amp; Hollister located in</p> <p>10 Cleveland, Ohio.</p> <p>11 My name is Jeff Koishor from</p> <p>12 Veritext. I am the videographer. The court</p> <p>13 reporter is Renee Pellegrino from Veritext.</p> <p>14 Counsel all present in the room and</p> <p>15 everyone attending remotely please state their</p> <p>16 name and affiliation for the record.</p> <p>17 MR. PIFKO: Good morning. This will</p> <p>18 probably take 20 minutes. Mark Pifko from Baron</p> <p>19 &amp; Budd, on behalf of the City of Cleveland, the</p> <p>20 witness, and the Plaintiffs' Executive Committee</p> <p>21 in the MDL.</p> <p>22 MS. ZIMMERMANN: Diandra Debrosse</p> <p>23 Zimmermann, Zarzaur, Mujumdar &amp; Debrosse, same</p> <p>24 as already stated.</p> <p>25 MS. KEARSE: Anne Kearse of Motley</p> | <p style="text-align: right;">Page 20</p> <p>1 Pharmaceuticals.</p> <p>2 MR. BOEHM: Paul Boehm from Williams</p> <p>3 &amp; Connolly for Cardinal Health.</p> <p>4 MR. SALIMBENE: Mike Salimbene from</p> <p>5 Reed Smith for AmerisourceBergen.</p> <p>6 MR. RUIZ: Anthony Ruiz from</p> <p>7 Zuckerman Spaeder for CVS Indiana, LLC and CVS</p> <p>8 Rx Services, Inc.</p> <p>9 MS. DENNIS: Madeline Dennis with</p> <p>10 Tucker Ellis on behalf of Janssen.</p> <p>11 MR. NAEEM: Tariq Naeem, also Tucker</p> <p>12 Ellis, on behalf of Janssen and J&amp;J.</p> <p>13 THE VIDEOGRAPHER: And on the phone?</p> <p>14 MR. CIULLO: Zachary Ciullo from</p> <p>15 Kirkland &amp; Ellis of behalf of Allergan.</p> <p>16 MS. SORICELLI: Jessica Soricelli</p> <p>17 with Ropes &amp; Gray on behalf of Mallinckrodt.</p> <p>18 MR. DAYNO: Theodore Dayno with</p> <p>19 Morgan Lewis on behalf of Teva.</p> <p>20 THE VIDEOGRAPHER: Will the court</p> <p>21 reporter please swear in the witness?</p> <p>22 MR. BOEHM: Can I just make a note?</p> <p>23 The deposition protocol entered in this case</p> <p>24 does require that if there are any attorneys</p> <p>25 listening in by telephone to this deposition,</p>        |
| <p style="text-align: right;">Page 19</p> <p>1 Rice on behalf of Summit County and the City of</p> <p>2 Akron.</p> <p>3 MR. GALLUCCI: Frank Gallucci with</p> <p>4 Plevin &amp; Gallucci on behalf of Cuyahoga County.</p> <p>5 MR. CIACCIO: Joseph Ciaccio, Napoli</p> <p>6 Shkolnik, on behalf of Cuyahoga County.</p> <p>7 MR. SUSMAN: Kevin Susman, Napoli</p> <p>8 Shkolnik, on behalf of Cuyahoga County.</p> <p>9 MS. BOOP: Elena Boop, City of</p> <p>10 Cleveland.</p> <p>11 MS. CAMPBELL: Kristen Campbell,</p> <p>12 Pelini, Campbell &amp; Williams, for Prescription</p> <p>13 Supply, Inc.</p> <p>14 MR. McLAUGHLIN: Chris McLaughlin,</p> <p>15 Jones Day, for Wal-Mart.</p> <p>16 MR. BARNES: Robert Barnes, Marcus &amp;</p> <p>17 Shapira, for HBC Service Company.</p> <p>18 MS. STANKEWICZ: Erin Stankewicz,</p> <p>19 with Jackson Kelly, on behalf of Miami-Luken.</p> <p>20 MR. PADUKONE: Aseem Padukone with</p> <p>21 Covington &amp; Burling on behalf of McKesson</p> <p>22 Corporation.</p> <p>23 MR. WEINOGRAD: Charlie Weinograd</p> <p>24 with Arnold &amp; Porter on behalf of Endo Health</p> <p>25 Solutions, Endo Pharmaceuticals and Par</p>                                                                                                                             | <p style="text-align: right;">Page 21</p> <p>1 they must identify themselves, so to the extent</p> <p>2 anybody who is listening in has not yet</p> <p>3 announced their presence telephonically, they</p> <p>4 should do so now.</p> <p>5 MR. SIMS: This is Thomas Sims with</p> <p>6 Baron &amp; Budd for the City of Cleveland.</p> <p>7 THE VIDEOGRAPHER: Court reporter,</p> <p>8 please swear in the witness.</p> <p>9 MERLE GORDON, of lawful age, called for</p> <p>10 examination, as provided by the Federal Rules of</p> <p>11 Civil Procedure, being by me first duly sworn,</p> <p>12 as hereinafter certified, deposed and said as</p> <p>13 follows:</p> <p>14 EXAMINATION OF MERLE GORDON</p> <p>15 BY MR. NAEEM:</p> <p>16 Q. Good morning. Could you please</p> <p>17 state your full name for the record?</p> <p>18 A. My name is Merle Gordon.</p> <p>19 Q. Ms. Gordon, we're here to take your</p> <p>20 deposition in an MDL related to the prescription</p> <p>21 opioid litigation. You're aware of that?</p> <p>22 A. I am aware.</p> <p>23 Q. Before we went on the record, and</p> <p>24 just to confirm with your counsel, I agreed I</p> <p>25 wouldn't ask any -- for your personal address as</p> |

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| <p style="text-align: right;">Page 22</p> <p>1 long as you agreed to accept service for any<br/>2 future proceedings.<br/>3 MR. PIFKO: Baron &amp; Budd agrees to<br/>4 accept service on behalf of any subpoenas or<br/>5 anything for the witness.<br/>6 MR. NAEEM: Great.<br/>7 Q. Ms. Gordon, could you please give us<br/>8 your work address?<br/>9 A. It's 75 Erieview Plaza, Cleveland,<br/>10 Ohio, 44114.<br/>11 Q. Thank you.<br/>12 Have you had your testimony taken<br/>13 before in either a deposition or trial?<br/>14 A. I've been deposed before, yes.<br/>15 Q. How many times?<br/>16 A. One time.<br/>17 Q. And did it relate to a personal<br/>18 matter or to a work matter?<br/>19 A. A work matter.<br/>20 Q. Could you give me a very brief<br/>21 discussion or a description of what the issues<br/>22 related to and who the employer was you were<br/>23 with when you testified?<br/>24 MR. PIFKO: Objection to the extent<br/>25 the question calls for attorney-client</p> | <p style="text-align: right;">Page 24</p> <p>1 defendant in that case?<br/>2 MR. PIFKO: Objection to the extent<br/>3 the question calls for a legal conclusion.<br/>4 A. I believe we were, yes.<br/>5 Q. Do you know the name of the<br/>6 plaintiff that filed that lawsuit?<br/>7 MR. PIFKO: Same objection.<br/>8 A. I don't recall.<br/>9 Q. Do you know how that case was<br/>10 resolved? And I may have asked this. I<br/>11 apologize. Did you have to testify at trial?<br/>12 A. Did not.<br/>13 Q. Since it's been a while since you<br/>14 were deposed, let me just, before we get further<br/>15 in here, give you some ground rules that will<br/>16 help us get through this deposition as<br/>17 efficiently as possible.<br/>18 First, I'm going to need you to<br/>19 verbalize your answers. Nods and shrugs don't<br/>20 come across in the transcript. They're<br/>21 difficult for the court reporter to take down.<br/>22 So can we agree that you'll -- to yeses and nos,<br/>23 no ambiguous language like uh-huh and unh-unh?<br/>24 A. Agree.<br/>25 Q. To the best we can, and that</p>                                                                      |
| <p style="text-align: right;">Page 23</p> <p>1 communication.<br/>2 If you can answer without disclosing<br/>3 conversations you had with counsel in that case,<br/>4 go ahead and do so.<br/>5 Q. And let me rephrase the question.<br/>6 Who were you employed by at the time<br/>7 that you sat for that deposition?<br/>8 A. The City of Cleveland.<br/>9 Q. When was that deposition?<br/>10 A. It was in the early 2000s.<br/>11 Q. This was while you were a city<br/>12 council person for the City of Cleveland?<br/>13 A. Correct.<br/>14 Q. What general topic matter did it<br/>15 relate to? Was it a criminal issue? Was it a<br/>16 civil issue, an employment issue?<br/>17 MR. PIFKO: Objection. Vague.<br/>18 Overbroad.<br/>19 A. It was a matter pertaining to a<br/>20 landfill that was located within the district<br/>21 that I represented.<br/>22 Q. And did that case end up going to<br/>23 trial?<br/>24 A. It did not.<br/>25 Q. Was the City of Cleveland the</p>             | <p style="text-align: right;">Page 25</p> <p>1 includes counsel in the room, we'll try not to<br/>2 talk over one other. Again, that's for the<br/>3 court reporter's benefit. Will you agree to do<br/>4 that?<br/>5 A. Yes.<br/>6 Q. If I ask a question and you don't<br/>7 understand it, I'm going to ask that you please<br/>8 ask me to rephrase it. If you think you know<br/>9 what I meant and still the question doesn't make<br/>10 sense, again, please ask me to rephrase it.<br/>11 We're going to assume that if you answer the<br/>12 question, you understood the question and the<br/>13 answer to the question was what you intended it<br/>14 to be, okay?<br/>15 MR. PIFKO: Objection. Vague.<br/>16 Q. Do you understand what I'm saying?<br/>17 A. I understand.<br/>18 Q. And then to the extent you need a<br/>19 break, just let your counsel know at any time.<br/>20 The only thing I'll ask is that if a question is<br/>21 pending when you ask for a break, you have to<br/>22 answer the question, okay?<br/>23 MR. PIFKO: We don't agree to that.<br/>24 If the witness has a question concerning<br/>25 privilege or something, she's free to take a</p> |

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| <p style="text-align: right;">Page 26</p> <p>1 break at any time.</p> <p>2 Q. If you need a break at any time for</p> <p>3 any reason, just let us know, okay?</p> <p>4 A. Okay.</p> <p>5 Q. Ms. Gordon, what did you do to</p> <p>6 prepare for your deposition today?</p> <p>7 MR. PIFKO: Objection to the extent</p> <p>8 the question calls for attorney-client</p> <p>9 communication.</p> <p>10 Aside from communications with</p> <p>11 counsel, you can answer the question.</p> <p>12 A. I met with counsel.</p> <p>13 Q. And your counsel sitting next to you</p> <p>14 defending you?</p> <p>15 A. Correct.</p> <p>16 Q. Any other counsel in the room?</p> <p>17 A. There were other counsel in the</p> <p>18 room.</p> <p>19 Q. How many?</p> <p>20 A. About six.</p> <p>21 Q. And were any of them internal</p> <p>22 counsel for the City of Cleveland?</p> <p>23 A. Yes.</p> <p>24 Q. How many?</p> <p>25 A. Two.</p>                                                     | <p style="text-align: right;">Page 28</p> <p>1 Q. When was the first time you met with</p> <p>2 counsel to prepare for this deposition</p> <p>3 specifically?</p> <p>4 A. Last week.</p> <p>5 Q. And so you've met with them five</p> <p>6 times total since last week?</p> <p>7 A. Correct.</p> <p>8 Q. All right. How much time would you</p> <p>9 estimate you've spent in the preparation for</p> <p>10 your deposition?</p> <p>11 A. We met for a few hours each time.</p> <p>12 Q. Did you review documents?</p> <p>13 A. Yes.</p> <p>14 Q. All right. Did anything come up</p> <p>15 during the preparation for your deposition that</p> <p>16 required your attorneys to collect documents</p> <p>17 that had not been collected before?</p> <p>18 MR. PIFKO: Objection. Vague.</p> <p>19 Objection to the extent it calls for</p> <p>20 attorney-client communications.</p> <p>21 Q. Let me back up.</p> <p>22 When did you first learn that this</p> <p>23 lawsuit had been filed?</p> <p>24 A. Probably a couple months ago.</p> <p>25 Q. All right. So were you consulted</p>                                      |
| <p style="text-align: right;">Page 27</p> <p>1 Q. Can you give me their names?</p> <p>2 A. Elena Boop is one and Shirley</p> <p>3 Tomasello.</p> <p>4 Q. And the other four, can you give me</p> <p>5 their names, please?</p> <p>6 A. I don't have their names to memory.</p> <p>7 Q. Are any of them in this room here</p> <p>8 today?</p> <p>9 A. Yes, some are in the room today.</p> <p>10 Q. Can you identify them, point them</p> <p>11 out?</p> <p>12 A. Yes.</p> <p>13 The woman sitting next to my</p> <p>14 counsel, and there were lawyers for the Taft law</p> <p>15 firm as well and a couple others that were in</p> <p>16 the room.</p> <p>17 Q. Any attorneys from Summit County or</p> <p>18 Akron that you're aware of?</p> <p>19 A. No.</p> <p>20 Q. Any attorneys from Cuyahoga County</p> <p>21 that you're aware of?</p> <p>22 A. No.</p> <p>23 Q. How many times did you meet with</p> <p>24 counsel to prepare for your deposition?</p> <p>25 A. Five times.</p> | <p style="text-align: right;">Page 29</p> <p>1 about any of the details regarding the City of</p> <p>2 Cleveland's public health department,</p> <p>3 specifically with it related to opioids, in</p> <p>4 preparation for preparing and filing the</p> <p>5 complaint?</p> <p>6 MR. PIFKO: Objection to the extent</p> <p>7 the question calls for attorney-client</p> <p>8 communications.</p> <p>9 Director Gordon, if you can answer</p> <p>10 without revealing any substantive conversations</p> <p>11 you may have had with counsel, you can answer</p> <p>12 the question.</p> <p>13 A. Can you ask the question again?</p> <p>14 Q. Yes. Let me start a little bit</p> <p>15 broader.</p> <p>16 Were you involved in preparing the</p> <p>17 actual complaint before it was filed?</p> <p>18 MR. PIFKO: Instruction not to</p> <p>19 answer. That's entirely privileged.</p> <p>20 MR. NAEEM: On the basis of?</p> <p>21 MR. PIFKO: Attorney-client</p> <p>22 communications.</p> <p>23 MR. NAEEM: If she was --</p> <p>24 MR. PIFKO: The question is --</p> <p>25 you're asking her what she was discussing with</p> |

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| <p style="text-align: right;">Page 30</p> <p>1 counsel in connection with preparing the</p> <p>2 complaint. I mean, preparing the complaint is a</p> <p>3 substantive discussion with counsel. I'm not</p> <p>4 going to let her answer that.</p> <p>5 Q. Did you see a draft of the complaint</p> <p>6 before it was filed?</p> <p>7 A. I did not.</p> <p>8 Q. Were you -- I'm sorry.</p> <p>9 Did you see a draft -- I'm sorry.</p> <p>10 Did you see the complaint prior to your</p> <p>11 deposition being scheduled in this case?</p> <p>12 MR. PIFKO: I'm going to instruct</p> <p>13 her not to answer on that to the extent it calls</p> <p>14 for work product in regard to what counsel</p> <p>15 showed her in preparing for the deposition.</p> <p>16 Q. Absent any communications with</p> <p>17 counsel by phone, by e-mail or otherwise, had</p> <p>18 you seen the complaint prior to your</p> <p>19 deposition --</p> <p>20 MR. PIFKO: To be clear, he's</p> <p>21 asking --</p> <p>22 Q. -- being scheduled?</p> <p>23 MR. PIFKO: He's only asking outside</p> <p>24 of communications with counsel.</p> <p>25 A. Not outside of communication with</p>                                                                | <p style="text-align: right;">Page 32</p> <p>1 Q. Okay. Let me ask that a little</p> <p>2 differently because I'm not sure we're on the</p> <p>3 same page.</p> <p>4 Do you maintain hard copies of</p> <p>5 documents in your office?</p> <p>6 A. I do.</p> <p>7 Q. Do you maintain hard copies of</p> <p>8 documents related to the City of Cleveland's</p> <p>9 efforts with respect to opioid-related issues in</p> <p>10 your office?</p> <p>11 A. I do.</p> <p>12 Q. Did you provide those to anybody for</p> <p>13 production in this litigation?</p> <p>14 A. I did.</p> <p>15 Q. When was that?</p> <p>16 A. In the last -- the last couple of</p> <p>17 months.</p> <p>18 Q. When was the most recent time you</p> <p>19 produced hard copy documents -- that you gave</p> <p>20 your documents to somebody for production in</p> <p>21 this litigation?</p> <p>22 MR. PIFKO: If you understand the</p> <p>23 question.</p> <p>24 A. I had gave some, I believe,</p> <p>25 yesterday or the day before yesterday.</p>                                                                                                                           |
| <p style="text-align: right;">Page 31</p> <p>1 counsel.</p> <p>2 Q. All right. After the complaint was</p> <p>3 filed, did someone come and collect your</p> <p>4 documents for purposes of production in this</p> <p>5 litigation?</p> <p>6 MR. PIFKO: Objection to the extent</p> <p>7 it calls for attorney-client communication with</p> <p>8 the witness.</p> <p>9 If you had conversations with</p> <p>10 someone other than counsel about collecting</p> <p>11 documents or someone who wasn't at the direction</p> <p>12 of counsel, you can answer the question.</p> <p>13 MR. NAEEM: I'm not talking about</p> <p>14 conversations. I'm talking about actions.</p> <p>15 Q. Do you know whether someone came to</p> <p>16 your office and collected documents at any point</p> <p>17 in time for production in this litigation?</p> <p>18 A. No one came to my office.</p> <p>19 Q. Did you collect the documents</p> <p>20 yourself for the purposes of production in this</p> <p>21 litigation, any hard copy documents? That's all</p> <p>22 I'm talking about right now.</p> <p>23 A. Hard copy documents. We submitted</p> <p>24 documents pertaining to our work in this area on</p> <p>25 behalf of the department.</p> | <p style="text-align: right;">Page 33</p> <p>1 Q. And do you know why those weren't</p> <p>2 produced before?</p> <p>3 MR. PIFKO: Objection.</p> <p>4 Argumentative.</p> <p>5 A. Over the weekend I was cleaning my</p> <p>6 office and reorganizing and found a couple</p> <p>7 additional files and brought them to my</p> <p>8 attorneys.</p> <p>9 MR. PIFKO: And just so you know,</p> <p>10 too, we're happy to provide copies of anything</p> <p>11 that you want if you need to make copies of</p> <p>12 anything to use in the course of the deposition</p> <p>13 today.</p> <p>14 MR. NAEEM: Okay. Do we want to do</p> <p>15 this on the record?</p> <p>16 MR. PIFKO: If we want to talk about</p> <p>17 the production, yeah, I would like to do it on</p> <p>18 the record.</p> <p>19 MR. NAEEM: Great.</p> <p>20 So the defendants collectively</p> <p>21 object to the late production of documents, you</p> <p>22 know, late yesterday, understanding the</p> <p>23 circumstances, and we'll be reserving time from</p> <p>24 this deposition, and depending on how it goes,</p> <p>25 asking perhaps to produce the witness again for</p> |

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| <p style="text-align: right;">Page 34</p> <p>1 deposition.</p> <p>2 MR. PIFKO: To be clear, our</p> <p>3 position is we reject any efforts to call the</p> <p>4 witness back. She's a high-level city official.</p> <p>5 There's a lot of mountains that had to be moved</p> <p>6 for her to show up today. You just heard her</p> <p>7 testimony about when the documents were</p> <p>8 identified. There's at least eight people in</p> <p>9 this room, countless people behind the scenes.</p> <p>10 It was only 600 pages. I don't believe there's</p> <p>11 any prejudice to you all in being able to</p> <p>12 prepare for the deposition, and like I said,</p> <p>13 we're happy to make any copies of anything that</p> <p>14 you want if you tell me. Just let me know.</p> <p>15 - - - - -</p> <p>16 (Thereupon, Deposition Exhibit 1,</p> <p>17 Letter from Tad Allan to Mark Pifko,</p> <p>18 dated July 18, 2018, with Attached</p> <p>19 Exhibit A, was marked for purposes</p> <p>20 of identification.)</p> <p>21 - - - - -</p> <p>22 Q. I'm just marking that for purposes</p> <p>23 of getting it on part of the record. It's our</p> <p>24 response to the late production of documents.</p> <p>25 Ms. Gordon, you said you found those</p> | <p style="text-align: right;">Page 36</p> <p>1 handwriting on page 1 and page 2. For example,</p> <p>2 on page 1, the second line, "Prescribing</p> <p>3 practices are no longer the precursor to OD."</p> <p>4 Is that your handwriting?</p> <p>5 A. This is my handwriting.</p> <p>6 Q. And OD refers to overdose?</p> <p>7 A. I assume so, yes.</p> <p>8 Q. Is this an example of the documents</p> <p>9 you found when you were cleaning out your</p> <p>10 office?</p> <p>11 MR. PIFKO: Objection. Vague.</p> <p>12 Q. Are there other documents within the</p> <p>13 documents you found that contain your</p> <p>14 handwriting and notes regarding those particular</p> <p>15 documents?</p> <p>16 A. There may be.</p> <p>17 - - - - -</p> <p>18 (Thereupon, Deposition Exhibit 1-B,</p> <p>19 E-Mail from Gary Gingell to Various</p> <p>20 Recipients dated March 6, 2018 Bates</p> <p>21 Stamped CLEVE_000299033, was marked</p> <p>22 for purposes of identification.)</p> <p>23 - - - - -</p> <p>24 Q. Ms. Gordon, I've had the court</p> <p>25 reporter hand you an exhibit that I've had</p> |
| <p style="text-align: right;">Page 35</p> <p>1 over the weekend?</p> <p>2 A. I did.</p> <p>3 Q. And are you aware that they were</p> <p>4 produced to us last night?</p> <p>5 A. I am not aware of that. I provided</p> <p>6 them to my counsel two days ago.</p> <p>7 - - - - -</p> <p>8 (Thereupon, Deposition Exhibit 1-A,</p> <p>9 Document Entitled "Heroin and Opioid</p> <p>10 Action Plan: Moving Forward,</p> <p>11 Agenda," with Attached Handwritten</p> <p>12 Notes, Beginning Bates Stamp</p> <p>13 CLEVE_000298750, was marked for</p> <p>14 purposes of identification.)</p> <p>15 - - - - -</p> <p>16 Q. Ms. Gordon, I've handed you a</p> <p>17 document that's been marked by the court</p> <p>18 reporter as Deposition Exhibit 1-A. Can you</p> <p>19 tell me whether this looks familiar to you?</p> <p>20 A. This does look familiar to me.</p> <p>21 Q. Is this one of the documents you</p> <p>22 found over the weekend when you were cleaning</p> <p>23 out your office?</p> <p>24 A. Yes.</p> <p>25 Q. And you see that there is</p>                                                                                                                                                                                                | <p style="text-align: right;">Page 37</p> <p>1 marked as Deposition Exhibit 1-B. Have you seen</p> <p>2 this document before?</p> <p>3 MR. PIFKO: Take your time to review</p> <p>4 it.</p> <p>5 A. Yes, I am familiar with this.</p> <p>6 Q. Is this one of the documents that</p> <p>7 you found over the weekend and produced to your</p> <p>8 counsel two days ago?</p> <p>9 A. I don't recall for sure, but this is</p> <p>10 a copy of an e-mail that came to me.</p> <p>11 Q. And it was sent to you by Gary?</p> <p>12 A. Gingell.</p> <p>13 Q. Gingell. Who is he?</p> <p>14 A. He is with the Cleveland Department</p> <p>15 of Police. He's a commander.</p> <p>16 Q. The date of this e-mail is March 6,</p> <p>17 2018?</p> <p>18 A. Correct.</p> <p>19 Q. Do you recall receiving it and</p> <p>20 reading it?</p> <p>21 A. I do recall.</p> <p>22 Q. And if this is one of the documents</p> <p>23 you found, I assume that means it's because you</p> <p>24 printed out your e-mails or some e-mails?</p> <p>25 A. It's a common practice.</p>                                               |

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| <p style="text-align: right;">Page 38</p> <p>1 Q. Do you sometimes highlight e-mails<br/>2 that you've printed out?<br/>3 A. Occasionally.<br/>4 Q. Now, you see there appears to be<br/>5 some highlighting, and that was in the copy<br/>6 provided to us I'll represent, and it says --<br/>7 it's highlighting this phrase, "With the U.S.<br/>8 dropping 6 billion and big pharma about to get<br/>9 whacked for hopefully many billions." Was that<br/>10 your highlighting in the original document that<br/>11 you printed?<br/>12 A. I do not recall.<br/>13 Q. But, to be clear, you do<br/>14 occasionally print documents and highlight them?<br/>15 A. I do.<br/>16 - - - - -<br/>17 (Thereupon, Deposition Exhibit 1-C,<br/>18 Document Entitled "Cuyahoga County<br/>19 State of Emergency Action Steps,"<br/>20 Beginning Bates Stamp<br/>21 CLEVE_000299083, was marked for<br/>22 purposes of identification.)<br/>23 - - - - -<br/>24 Q. Ms. Gordon, I've had the court<br/>25 reporter hand you a copy of what's been marked</p> | <p style="text-align: right;">Page 40</p> <p>1 Q. Do you remember the circumstances at<br/>2 which Dr. Papp presented this information,<br/>3 either via this document or through some sort of<br/>4 oral presentation?<br/>5 MR. PIFKO: Objection. Vague.<br/>6 Overbroad.<br/>7 A. Dr. Papp attends a fair amount of<br/>8 meetings that I've also attended and has been<br/>9 instrumental in looking at ways that we can<br/>10 address this significant issue in this community<br/>11 and puts together documents on occasion.<br/>12 Q. Okay. I'm asking, do you have a<br/>13 specific recollection of any meeting that took<br/>14 place where either this document was handed out<br/>15 or this information was discussed?<br/>16 MR. PIFKO: Objection. Compound.<br/>17 A. Dr. Papp is very vocal at these<br/>18 meetings and has been a significant contributor<br/>19 to our collective need to respond to this issue<br/>20 in this community. I recall her talking about a<br/>21 fair amount of the items in this document. I<br/>22 cannot remember exactly when she produced it or<br/>23 when she handed it out.<br/>24 Q. Do you recall whether you got this<br/>25 document via e-mail?</p> |
| <p style="text-align: right;">Page 39</p> <p>1 as Deposition Exhibit 1-C. Have you seen this<br/>2 document before?<br/>3 MR. PIFKO: Please take your time to<br/>4 review it.<br/>5 A. I am familiar with this document.<br/>6 Q. Is this one of the documents that<br/>7 you found this weekend and produced to your<br/>8 counsel two days ago?<br/>9 A. I don't recall.<br/>10 Q. The handwriting at the top right<br/>11 corner of that document on page 1, is that your<br/>12 handwriting?<br/>13 A. It looks like my handwriting.<br/>14 Q. Who is Dr. Papp?<br/>15 A. Dr. Papp is a physician at Metro<br/>16 Hospital in Cleveland.<br/>17 Q. Why did you write her name at the<br/>18 top of this document?<br/>19 A. I believe that she was the one who<br/>20 handed this document out and I put her name on<br/>21 it to know who either the author was or who<br/>22 distributed the document.<br/>23 Q. Do you remember Dr. Papp handing<br/>24 this document to you?<br/>25 A. I don't recall for sure.</p>                         | <p style="text-align: right;">Page 41</p> <p>1 A. I do not recall.<br/>2 Q. Do you recall the date you might<br/>3 have received this document?<br/>4 A. I do not recall.<br/>5 Q. The little arrows to the side of the<br/>6 lettered sections in the middle of page 1, is<br/>7 that your -- do you believe that's your<br/>8 handwriting?<br/>9 A. I cannot say for sure.<br/>10 Q. Bullet point number 3 there says,<br/>11 "Monies seized from drug arrests (trafficking,<br/>12 dealing, etc.) are to be funneled back into<br/>13 treatment programs/prevention/naloxone<br/>14 programs." Do you see that?<br/>15 A. Item C?<br/>16 Q. No. 3. I'm sorry.<br/>17 A. 3. Yes, I see it.<br/>18 Q. Is that something that's currently<br/>19 being done at the City of Cleveland?<br/>20 MR. PIFKO: Objection. Foundation.<br/>21 Objection to the extent the question calls for<br/>22 speculation.<br/>23 A. I do not know that that takes place<br/>24 currently.<br/>25 Q. All right. And so to be clear --</p>                                                                                                                                                                                            |

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| <p style="text-align: right;">Page 42</p> <p>1 we're going to get into this -- the Cleveland<br/>2 Department of Public Health's opioid-related<br/>3 activities. With respect to this point 3 that<br/>4 we just read, are you telling me you're not<br/>5 aware whether any money seized by the Cleveland<br/>6 Police Department or any other police force in<br/>7 Cuyahoga County is redirected back to the<br/>8 Cleveland Department of Public Health for use in<br/>9 treatment programs?<br/>10 MR. PIFKO: Objection. Compound.<br/>11 Calls for speculation. Foundation.<br/>12 A. I'm not aware that that happens, no.<br/>13 Q. And by saying "not aware," are you<br/>14 in the position -- do you believe you would know<br/>15 that if it was happening?<br/>16 MR. PIFKO: Same objections.<br/>17 A. I do not know that those monies are<br/>18 directly supporting the general fund, which does<br/>19 support some of our programs in the health<br/>20 department.<br/>21 Q. We'll come back to this if we need<br/>22 to then.<br/>23 MR. PIFKO: Can we take a short<br/>24 break?<br/>25 MR. NAEEM: Sure.</p> | <p style="text-align: right;">Page 44</p> <p>1 privacy. Her medical condition is not at issue<br/>2 in this case. I'm going to instruct her not to<br/>3 answer.<br/>4 MR. NAEEM: Well, I believe it goes<br/>5 directly to bias, so I'm going to ask you to<br/>6 reconsider that, and also to keep the deposition<br/>7 protocol in mind with your objections.<br/>8 MR. PIFKO: Objection stands.<br/>9 MR. NAEEM: You're instructing the<br/>10 witness not to answer?<br/>11 MR. PIFKO: Yeah.<br/>12 Q. Have you ever used prescription<br/>13 opioids?<br/>14 MR. PIFKO: Same objection. Invades<br/>15 the witness' personal medical privacy. She's<br/>16 not here to testify on her individual behalf.<br/>17 She's a city official. I'm going to instruct<br/>18 her not to answer.<br/>19 MR. NAEEM: It goes to bias. Are<br/>20 you still instructing the witness not to answer?<br/>21 MR. PIFKO: Yes.<br/>22 Q. Have you ever used heroine?<br/>23 MR. PIFKO: Same objection.<br/>24 MR. NAEEM: Goes to bias.<br/>25 Instructing her not to answer?</p>                                      |
| <p style="text-align: right;">Page 43</p> <p>1 THE VIDEOGRAPHER: Going off the<br/>2 record. The time is 9:43.<br/>3 (Recess had.)<br/>4 THE VIDEOGRAPHER: Back on the<br/>5 record. The time is 9:53.<br/>6 BY MR. NAEEM:<br/>7 Q. Ms. Gordon, before we went off the<br/>8 record, we had been talking about documents that<br/>9 you found this weekend and produced to your<br/>10 counsel a couple days ago. I do want to go<br/>11 ahead and move on and try to get us further into<br/>12 the depo. Before I do, can I ask whether you<br/>13 have ever been part of a lawsuit as a plaintiff<br/>14 in which you've sued a pharmaceutical company?<br/>15 A. I have not.<br/>16 Q. Do you have any friends or family<br/>17 who have done so?<br/>18 MR. PIFKO: Objection. Calls for<br/>19 speculation.<br/>20 A. I do not.<br/>21 Q. Have you ever suffered a severe<br/>22 adverse reaction that you attributed to a<br/>23 pharmaceutical product?<br/>24 MR. PIFKO: Objection to the extent<br/>25 it invades the witness' personal medical</p>                                                                       | <p style="text-align: right;">Page 45</p> <p>1 MR. PIFKO: Yes. Any questions you<br/>2 ask about her medical history, I'm going to<br/>3 object and instruct her not to answer on the<br/>4 medical privilege.<br/>5 Q. Have any of your friends or family<br/>6 ever used heroine?<br/>7 MR. PIFKO: Same objection.<br/>8 MR. NAEEM: I would again state it<br/>9 goes to bias and she has no privilege to protect<br/>10 her friends or family members with respect to<br/>11 their medical history.<br/>12 MR. PIFKO: They're not here to<br/>13 assert their own concerns about it, and so if<br/>14 you want to go and ask them and -- we can do<br/>15 that, but I'm going to instruct her not to<br/>16 answer until we know what any outside people's<br/>17 position is with respect to their medical<br/>18 privacy.<br/>19 MR. NAEEM: So, to be clear, what is<br/>20 the privilege you are asserting and instructing<br/>21 her not to answer on?<br/>22 MR. PIFKO: Confidential medical<br/>23 privilege.<br/>24 MR. NAEEM: Okay. Do you represent<br/>25 any of her friends and family?</p> |

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| <p style="text-align: right;">Page 46</p> <p>1 MR. PIFKO: No, but I'm not going to<br/>2 let her disclose a third party's medical<br/>3 condition in this proceeding without their<br/>4 permission.<br/>5 MR. NAEEM: I haven't asked and I<br/>6 won't ask for any of the names, so I'll ask<br/>7 again.<br/>8 Q. Do you have any friends or family<br/>9 members who have ever used heroine?<br/>10 MR. PIFKO: If you want to ask<br/>11 her -- I think that's too specific. If you want<br/>12 to ask her if she knows anyone, I'll let her<br/>13 answer that question.<br/>14 Q. Let's go backwards, then, on that<br/>15 basis.<br/>16 Do you know anyone who's ever<br/>17 suffered a severe adverse reaction attributed to<br/>18 a pharmaceutical product?<br/>19 MR. PIFKO: Objection to the extent<br/>20 the question calls for expert opinion. Vague.<br/>21 Overbroad.<br/>22 You can answer.<br/>23 A. Any pharmaceutical product? I can't<br/>24 say that anybody has not. I don't know that I<br/>25 would know that.</p>                                                                                                                     | <p style="text-align: right;">Page 48</p> <p>1 A. I can't say that I do or I don't.<br/>2 Q. Do you personally know anyone who<br/>3 has ever used heroine?<br/>4 A. In the course of my job I've met a<br/>5 number of people who have attended meetings, who<br/>6 have told their story, many addicts who have<br/>7 shared their story and what they have taken and<br/>8 what they've been addicted to, and some have<br/>9 admitted that it has been heroine.<br/>10 Q. Absent any information you got in<br/>11 your employment, do you know anyone who has ever<br/>12 used heroine?<br/>13 MR. PIFKO: Objection. Vague.<br/>14 A. I can't say that I do or that I<br/>15 don't or that they have admitted that to me.<br/>16 Q. Are you aware in your personal life,<br/>17 not your employment, of anyone who has used<br/>18 illicit fentanyl?<br/>19 A. I can't say that I do or that I<br/>20 don't.<br/>21 Q. So the question was are you aware.<br/>22 So you are not aware of anyone?<br/>23 A. I am not aware.<br/>24 Q. Are you aware of anyone in your<br/>25 personal, not your employment life, who has ever</p> |
| <p style="text-align: right;">Page 47</p> <p>1 Q. Well, that's really what the<br/>2 question is. Do you know anyone who's ever<br/>3 suffered a severe adverse reaction that they<br/>4 attributed to a pharmaceutical product?<br/>5 MR. PIFKO: Same objection. Calls<br/>6 for speculation, expert opinion.<br/>7 A. Perhaps I do. I don't know that<br/>8 anybody has said to me specifically. Some<br/>9 people have allergies to some products but I<br/>10 don't necessarily talk about that with friends.<br/>11 Q. So you do know people who have<br/>12 suffered a severe adverse reaction that they<br/>13 have attributed to pharmaceutical products?<br/>14 MR. PIFKO: Objection.<br/>15 Mischaracterizes testimony. Asked and answered.<br/>16 A. I'm not entirely sure that's what I<br/>17 said. I may know people. I can't say that I<br/>18 can answer that question head on.<br/>19 Q. Do you know anyone who has ever sued<br/>20 a pharmaceutical company?<br/>21 A. I don't know that I do.<br/>22 Q. Are you aware of any -- of anyone<br/>23 who's used prescription opioids?<br/>24 MR. PIFKO: Objection. Vague.<br/>25 Overbroad.</p> | <p style="text-align: right;">Page 49</p> <p>1 suffered from addiction?<br/>2 A. I do know people, yes, I am aware.<br/>3 Q. What substances -- without revealing<br/>4 their identity, what substances are you aware of<br/>5 that those people suffered from addiction from?<br/>6 MR. PIFKO: Objection. Calls for<br/>7 speculation. Objection to the extent it calls<br/>8 for expert opinion.<br/>9 A. I don't have specificity on what<br/>10 they are addicted to or were addicted to.<br/>11 Q. So you haven't had conversations<br/>12 about what the substance was but you do know in<br/>13 your personal life people who suffer from<br/>14 addiction?<br/>15 A. I do.<br/>16 Q. Ms. Gordon, could you briefly run<br/>17 through your undergraduate and post-graduate<br/>18 education?<br/>19 A. So I have a Bachelor's degree and I<br/>20 have a Master's in public administration.<br/>21 Q. And your Bachelor's was where?<br/>22 A. Hampshire College.<br/>23 Q. And did any of your studies at<br/>24 Hampshire College involve substance abuse<br/>25 courses?</p>                                               |

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| <p style="text-align: right;">Page 50</p> <p>1 A. No.</p> <p>2 Q. Mental health?</p> <p>3 A. No, none that I can recall.</p> <p>4 Q. Any medical training?</p> <p>5 A. I don't have any medical training.</p> <p>6 Q. Any courses or training in</p> <p>7 epidemiology?</p> <p>8 A. I have attended courses on</p> <p>9 epidemiology.</p> <p>10 Q. As part of your undergraduate</p> <p>11 education?</p> <p>12 A. No, not as part of my undergraduate</p> <p>13 education.</p> <p>14 Q. How about as part of your graduate</p> <p>15 education?</p> <p>16 A. No, not specifically.</p> <p>17 Q. As part of your employment?</p> <p>18 A. As part of my employment -- sorry.</p> <p>19 The question again is?</p> <p>20 Q. Have you taken any courses in</p> <p>21 epidemiology?</p> <p>22 A. I have not taken any specific</p> <p>23 courses on epidemiology.</p> <p>24 Q. Have you received any training on</p> <p>25 epidemiology?</p>                                                                                                                                                                                          | <p style="text-align: right;">Page 52</p> <p>1 Q. And what was the purpose of those</p> <p>2 meetings?</p> <p>3 MR. PIFKO: Objection. Vague.</p> <p>4 A. To understand better the work that</p> <p>5 they do, the data that they -- they analyze, and</p> <p>6 data that they produce, and what -- what is then</p> <p>7 done with the data and -- yeah.</p> <p>8 Q. Would you consider yourself an</p> <p>9 epidemiologist?</p> <p>10 A. I do not consider myself an</p> <p>11 epidemiologist.</p> <p>12 Q. Does the City of Cleveland have</p> <p>13 epidemiologists that work with -- in analyzing</p> <p>14 opioid-related issues?</p> <p>15 A. We employ epidemiologists, the</p> <p>16 Cleveland Department of Public Health, yes.</p> <p>17 Q. Okay. How many?</p> <p>18 A. There are three currently in my</p> <p>19 department.</p> <p>20 Q. What are their names?</p> <p>21 A. I have three of them. Wendy Foster,</p> <p>22 Sheena Fryerson and Katherine Romig.</p> <p>23 Q. I've seen a name in the documents,</p> <p>24 Jana Rush. Is she employed by the City of</p> <p>25 Cleveland?</p> |
| <p style="text-align: right;">Page 51</p> <p>1 A. I have some, yes.</p> <p>2 Q. Could you describe when that was?</p> <p>3 A. Specifically, if you're asking for</p> <p>4 an actual date --</p> <p>5 Q. A year is fine.</p> <p>6 A. Over the course of the last two</p> <p>7 years I have spent a fair amount of time with</p> <p>8 epidemiologists and immersed in that field.</p> <p>9 Q. All right. So one of the things you</p> <p>10 just said was that you have sat and discussed</p> <p>11 with epidemiologists in meetings various topics.</p> <p>12 Was the purpose to train you in the underlying</p> <p>13 field of epidemiology?</p> <p>14 MR. PIFKO: Objection. Vague.</p> <p>15 Objection. Calls for speculation.</p> <p>16 You can answer.</p> <p>17 A. It was -- I'm sorry. You have to</p> <p>18 repeat the question.</p> <p>19 Q. Sure.</p> <p>20 You have sat in during the course of</p> <p>21 your career in meetings with epidemiologists. I</p> <p>22 think that's a general statement as to what you</p> <p>23 told me. Is that accurate?</p> <p>24 A. I have met with many</p> <p>25 epidemiologists.</p> | <p style="text-align: right;">Page 53</p> <p>1 A. She's no longer employed by the City</p> <p>2 of Cleveland.</p> <p>3 Q. Was she formerly an epidemiologist</p> <p>4 in your department?</p> <p>5 A. Yes.</p> <p>6 Q. When did she leave the City of</p> <p>7 Cleveland?</p> <p>8 A. She left, I believe, in early 2017.</p> <p>9 Q. Do you know where she is now?</p> <p>10 A. I do not.</p> <p>11 Q. Why did she leave?</p> <p>12 MR. PIFKO: Objection. Calls for</p> <p>13 speculation. Foundation.</p> <p>14 Q. Do you know why she left?</p> <p>15 A. I do not know why she left.</p> <p>16 Q. Was she fired?</p> <p>17 A. She was not fired.</p> <p>18 Q. She voluntarily terminated her</p> <p>19 employment to the best of your knowledge?</p> <p>20 A. Correct.</p> <p>21 Q. During your education did you take</p> <p>22 any courses -- and this is either as an</p> <p>23 undergraduate or graduate -- in pharmacology?</p> <p>24 A. I did not.</p> <p>25 Q. I don't want to go through your</p>                                                                                             |

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| <p style="text-align: right;">Page 54</p> <p>1 entire employment history, but you were a member<br/>2 of Cleveland City Council; is that accurate?<br/>3 A. That is accurate.<br/>4 Q. What years was that?<br/>5 A. 1997 to 2005.<br/>6 Q. And what district did you serve<br/>7 during that time?<br/>8 A. Then it was ward 15.<br/>9 Q. What communities does that encompass<br/>10 or what parts of the City of Cleveland does that<br/>11 entail?<br/>12 A. Generally they were the<br/>13 neighborhoods of Old Brooklyn and Brooklyn<br/>14 Center.<br/>15 Q. Did you serve on any city council<br/>16 committees while you were a council person?<br/>17 A. I did.<br/>18 Q. What committees did you participate<br/>19 in?<br/>20 A. I chaired the public health<br/>21 committee. I also -- then in my second term I<br/>22 chaired the community and economic development<br/>23 committee, sat on the finance committee. I'm<br/>24 not sure if I can remember them all, but<br/>25 aviation transportation committee, employment</p> | <p style="text-align: right;">Page 56</p> <p>1 Foundation. Speculation.<br/>2 A. I'm provided data almost on a daily,<br/>3 if not weekly basis, and along with that data is<br/>4 zip codes, and so we are tracking zip codes and<br/>5 areas of the city that may or may not be<br/>6 impacted more at any given time.<br/>7 Q. Ms. Gordon, how long have you lived<br/>8 in the City of Cleveland or in this general<br/>9 area?<br/>10 A. Lived in the general area almost my<br/>11 entire life except for school.<br/>12 Q. So you're well familiar with the<br/>13 various geographic areas within the City of<br/>14 Cleveland?<br/>15 A. Yes.<br/>16 Q. Are there certain neighborhoods that<br/>17 are more impacted by the opioid crisis currently<br/>18 in the City of Cleveland than others?<br/>19 MR. PIFKO: Objection. Foundation.<br/>20 Vague. Overbroad.<br/>21 A. We get this data on a daily almost<br/>22 or weekly basis and look at zip codes and<br/>23 analyze where the trends are and where there are<br/>24 fatals and non-fatals due to overdoses and look<br/>25 at that based on zip codes and neighborhoods and</p>                                                                                                                                   |
| <p style="text-align: right;">Page 55</p> <p>1 committee, rules committee.<br/>2 Q. Is -- and I'm talking about current<br/>3 day.<br/>4 A. Um-hum.<br/>5 Q. Is opioid abuse and addiction an<br/>6 issue in the Old Brooklyn neighborhood?<br/>7 MR. PIFKO: Objection. Vague.<br/>8 Foundation.<br/>9 Q. Well, Ms. Gordon, one of the things<br/>10 you do, that your department does currently is<br/>11 try to provide treatment for opioid addicts; is<br/>12 that fair?<br/>13 A. We try to provide as many programs<br/>14 as we possibly can with the budget we have to<br/>15 address this issue.<br/>16 Q. And so I would imagine, as the<br/>17 director of that department, you're well aware<br/>18 of what communities in the City of Cleveland are<br/>19 facing opioid abuse and addiction issues; is<br/>20 that fair?<br/>21 A. That is fair.<br/>22 Q. Are there some parts of the City of<br/>23 Cleveland that have higher rates of opioid abuse<br/>24 and addiction than others?<br/>25 MR. PIFKO: Objection. Vague.</p>   | <p style="text-align: right;">Page 57</p> <p>1 communities that are impacted.<br/>2 Q. Okay. I understand what you look at<br/>3 and so I'm asking you, are there certain areas<br/>4 that, when you look at the trends, are more<br/>5 impacted by the opioid crisis than others?<br/>6 MR. PIFKO: Objection to the extent<br/>7 the question calls for the witness to speak to<br/>8 data which speaks for itself. Vague.<br/>9 Ambiguous.<br/>10 MR. NAEEM: Mr. Pifko, I'm going to<br/>11 remind you again that the deposition protocol is<br/>12 very strict regarding the amount of objections<br/>13 you can raise and your ability to speak on the<br/>14 record, so I would ask again to keep it short<br/>15 and to the objections permitted.<br/>16 MR. PIFKO: Well, I'm stating my<br/>17 objection to the clarity and specificity and I'm<br/>18 entitled to protect the record and I'm going to<br/>19 continue to do that. If you have a problem with<br/>20 my articulation of objections, you should try to<br/>21 articulate more specific questions, and if you<br/>22 have further problems, we can address it. But I<br/>23 don't believe there's anything improper. I read<br/>24 the protocol and I'm familiar with it.<br/>25 MR. NAEEM: Okay. Well, we can</p> |

15 (Pages 54 - 57)

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| <p style="text-align: right;">Page 58</p> <p>1 address it as it goes into the deposition. If<br/>2 we have to, we'll bring it up to the special<br/>3 master or the judge.<br/>4 Q. So the question was, based on your<br/>5 lifelong history as a Clevelander and your<br/>6 employment as the director of public health in<br/>7 the City of Cleveland, are there currently areas<br/>8 of Cleveland or neighborhoods of Cleveland that<br/>9 are more impacted by the opioid crisis than<br/>10 others, that have higher incidents of opioid<br/>11 abuse and addiction than others?<br/>12 MR. PIFKO: Objection. Compound.<br/>13 Vague. Objection to the extent it's asking<br/>14 about data that speaks for itself.<br/>15 A. All the communities are impacted.<br/>16 We've looked at data. There are -- there are<br/>17 some neighborhoods that have more incidents than<br/>18 others over time, and that can migrate and all<br/>19 depend on what's going on.<br/>20 Q. At the time you were a city council<br/>21 person in ward 15, was Old Brooklyn one of those<br/>22 communities that had a higher incidence of<br/>23 opioid abuse and addiction than other<br/>24 communities in the neighborhood?<br/>25 MR. PIFKO: Objection. Foundation.</p> | <p style="text-align: right;">Page 60</p> <p>1 that was an issue that we looked at<br/>2 specifically, but I do recall that this was<br/>3 something that was emerging, and data was just<br/>4 anecdotally and in community meetings and we<br/>5 were starting to hear from families and people<br/>6 who were talking about addiction and how that<br/>7 was impacting their families and those<br/>8 communities.<br/>9 Q. And that emerging data that you just<br/>10 referenced, was that opioid-related data?<br/>11 A. I can't say with specificity.<br/>12 Q. How about generally; do you recall<br/>13 any discussions of opioids impacting the City of<br/>14 Cleveland during your tenure as a city council<br/>15 person?<br/>16 MR. PIFKO: Objection. Vague.<br/>17 Overbroad.<br/>18 A. I don't recall with specificity.<br/>19 Q. Do you recall generally opioid<br/>20 issues or heroine abuse or fentanyl abuse or<br/>21 prescription drug abuse being an issue in the<br/>22 City of Cleveland between 2007 and -- sorry,<br/>23 1997 and 2005 as a city council person?<br/>24 MR. PIFKO: Objection. Compound.<br/>25 A. I recall going to a lot of meetings</p>                                                                                    |
| <p style="text-align: right;">Page 59</p> <p>1 A. I can't say that I recall that with<br/>2 specificity.<br/>3 Q. Did ward 15 -- strike that.<br/>4 Was opioid abuse and addiction an<br/>5 issue in ward 15 during your tenure as a city<br/>6 council person?<br/>7 MR. PIFKO: Objection. Foundation.<br/>8 A. I have recollection that addiction<br/>9 was -- was an issue throughout the entire city<br/>10 and was impacting that community that I<br/>11 represented, yes.<br/>12 Q. And when you say "addiction," are<br/>13 you talking about opioid addiction or just<br/>14 addiction generally?<br/>15 A. I can't say with specificity on<br/>16 whether there was direct opioid addiction at<br/>17 that time. I don't recall with specificity. I<br/>18 don't recall.<br/>19 Q. How about generally? Do you recall<br/>20 whether opioid abuse and addiction were issues<br/>21 in ward 15 during your tenure as a city council<br/>22 person?<br/>23 A. As a representative, we looked at<br/>24 all sorts of things that impacted the community.<br/>25 I can't say with absolute certainty that -- that</p>                                                                                                                                          | <p style="text-align: right;">Page 61</p> <p>1 and hearing from families and hearing from<br/>2 neighborhoods about the impact of addiction and<br/>3 what was happening within their own families. I<br/>4 remember hearing stories of people's houses<br/>5 getting broken into and people going into the<br/>6 bathrooms and looking for drugs in medicine<br/>7 cabinets. I remember hearing about this<br/>8 countless times. These were painkillers. These<br/>9 were pills people were looking for in people's<br/>10 homes. I went to a lot of meetings and heard a<br/>11 lot of stories of this nature.<br/>12 Q. So you do have specific recollection<br/>13 while you were at city council of discussions<br/>14 related to opioid abuse and addiction?<br/>15 MR. PIFKO: Objection to the extent<br/>16 the question mischaracterizes her testimony.<br/>17 MR. BOEHM: That's an outrageous<br/>18 objection. I just have to jump in. Read the<br/>19 deposition protocol. It doesn't permit that<br/>20 type of objection.<br/>21 MR. PIFKO: I don't know who you<br/>22 are, but you can't speak, okay? You need to be<br/>23 quiet. There's one person who speaks at a time,<br/>24 so that's the end of it.<br/>25 MR. BOEHM: That's not the end of</p> |

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| <p style="text-align: right;">Page 62</p> <p>1 it. I'm going to speak if I want to. My name<br/>2 is Paul Boehm. I'm from Williams &amp; Connolly in<br/>3 Washington, D.C.<br/>4 MR. PIFKO: Okay. The protocol is<br/>5 one person speaks at a time, and you will have<br/>6 your turn. You are not allowed to speak right<br/>7 now.<br/>8 MR. BOEHM: I am going to speak to<br/>9 raise this objection. You're not going to stop<br/>10 me from doing that. The objections that you're<br/>11 raising, particularly the last one that you did,<br/>12 was outrageous. It doesn't comport with the<br/>13 deposition protocol.<br/>14 MR. PIFKO: You're characterizing --<br/>15 MR. BOEHM: I'm not done.<br/>16 MR. PIFKO: I don't care if you're<br/>17 done. You're not authorized to speak. Be<br/>18 quiet.<br/>19 MR. BOEHM: I'm here representing my<br/>20 client.<br/>21 MR. PIFKO: You're going to need to<br/>22 leave the room if you can't abide by the rules<br/>23 here.<br/>24 MR. BOEHM: How are you going to get<br/>25 me to leave the room?</p>    | <p style="text-align: right;">Page 64</p> <p>1 MR. BOEHM: I am authorized to<br/>2 speak.<br/>3 MR. PIFKO: No, you're not.<br/>4 MR. BOEHM: I am and I'm going to<br/>5 speak.<br/>6 MR. PIFKO: If you want to speak,<br/>7 then he's going to have to stop speaking.<br/>8 MR. BOEHM: He has stopped speaking.<br/>9 You're the one who won't stop speaking.<br/>10 MR. PIFKO: No. Only one counsel<br/>11 can address the witness at a time --<br/>12 MR. BOEHM: I'm not addressing the<br/>13 witness.<br/>14 MR. PIFKO: And you're addressing my<br/>15 objections concerning the witness.<br/>16 MR. BOEHM: I'm addressing you. You<br/>17 need to get control of the way you're handling<br/>18 it.<br/>19 MR. PIFKO: I've got perfect<br/>20 control, okay. You need to get control. You're<br/>21 sitting halfway down the table and you have no<br/>22 business here, okay.<br/>23 MR. BOEHM: I have no business here?<br/>24 MR. PIFKO: Yeah. You're not the<br/>25 questioner so you need to be quiet.</p>                           |
| <p style="text-align: right;">Page 63</p> <p>1 MR. PIFKO: Well, if you can't<br/>2 comply with the deposition protocol, you can't<br/>3 be here.<br/>4 MR. BOEHM: That's acute, coming<br/>5 from you who has not been compliant with their<br/>6 objections from the start.<br/>7 MR. PIFKO: I've read the protocol.<br/>8 MR. BOEHM: I'm going to ask you to<br/>9 rereview it.<br/>10 MR. PIFKO: You can object, you can<br/>11 state your objection with clarity and<br/>12 specificity, and I have done that. There's<br/>13 nothing preventing me from doing that.<br/>14 MR. BOEHM: You're coaching the<br/>15 witness.<br/>16 MR. PIFKO: I'm not coaching the<br/>17 witness at all. The record is very clear.<br/>18 MR. BOEHM: But I will take this to<br/>19 Special Master Cohen, so you need to stop it,<br/>20 and if I need to --<br/>21 MR. PIFKO: Well, there's nothing to<br/>22 take. Go ahead. Take anything --<br/>23 MR. BOEHM: Stop talking over me.<br/>24 MR. PIFKO: I will talk over you.<br/>25 You're not authorized to speak right now.</p> | <p style="text-align: right;">Page 65</p> <p>1 MR. BOEHM: I'm not going to be<br/>2 quiet.<br/>3 MR. PIFKO: Okay. I'm going to<br/>4 terminate this deposition if you're going to<br/>5 keep speaking because you're not authorized to<br/>6 speak.<br/>7 MR. BOEHM: I'm going to state my<br/>8 objection for the record.<br/>9 MR. PIFKO: Okay. Then Tariq needs<br/>10 to leave and stop asking questions and you come<br/>11 and sit here if you want to talk.<br/>12 MR. BOEHM: That's not the way --<br/>13 MR. PIFKO: You guys -- as defense<br/>14 counsel, you guys need to decide who is going to<br/>15 speak for you all, okay? It's only going to be<br/>16 one person at a time, and we're not doing this.<br/>17 MR. BOEHM: I'm not speaking for<br/>18 Tariq. I'm speaking for my client.<br/>19 MR. PIFKO: Well, then he's done<br/>20 speaking; apparently you're speaking? We're not<br/>21 doing this.<br/>22 MR. BOEHM: He has paused for me to<br/>23 speak.<br/>24 MR. PIFKO: No. Only one counsel at<br/>25 a time.</p> |

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| <p style="text-align: right;">Page 66</p> <p>1 MR. BOEHM: I've made a very simple<br/>2 request. One of them is to let me make my<br/>3 record, and then when I'm done, you can say<br/>4 whatever you want.<br/>5 MR. PIFKO: No. You do not have the<br/>6 right to make a record while he's speaking. You<br/>7 do not have that right.<br/>8 MR. BOEHM: I'm asking you to read<br/>9 the deposition protocol again because you've<br/>10 seemed to have forgotten some important<br/>11 components.<br/>12 MR. PIFKO: I don't need your<br/>13 characterization of the deposition protocol.<br/>14 I've read it very carefully and I'm allowed to<br/>15 state my objections with specificity and clarity<br/>16 and I'm going to do that and I'm going to<br/>17 continue to do that and I'm going to protect the<br/>18 record as I deem appropriate. The record is<br/>19 clear that the witness is not being coached, I'm<br/>20 not telling her what to say.<br/>21 MR. BOEHM: If you continue to do it<br/>22 and the way you're doing it, this is going to be<br/>23 in front of Special Master --<br/>24 MR. PIFKO: Well, that's fine. I<br/>25 don't believe anything I'm doing is wrong and</p> | <p style="text-align: right;">Page 68</p> <p>1 MR. PIFKO: No, you're not. You're<br/>2 clearly not. You're clearly not abiding by the<br/>3 rules.<br/>4 MR. BOEHM: Go ahead.<br/>5 MR. PIFKO: You need to keep it<br/>6 quiet, okay?<br/>7 MR. BOEHM: You need to stop trying<br/>8 to speak with me in that kind of disrespectful<br/>9 tone and you're not going to make me leave the<br/>10 room.<br/>11 MR. PIFKO: You're the one who<br/>12 started the disrespectful tone. I'm here doing<br/>13 my job and it's not your business about how I do<br/>14 my job.<br/>15 MR. BOEHM: It's not my business how<br/>16 you do your job.<br/>17 Go ahead. You have my position.<br/>18 MR. PIFKO: You're not authorized to<br/>19 take a position right now.<br/>20 MR. NAEEM: Are you ready?<br/>21 MR. PIFKO: Are you speaking? Are<br/>22 you asking the questions, sir? I believe you<br/>23 are, and I've had fine interactions with you and<br/>24 I don't have any problems with you, but I need<br/>25 to know who is speaking for the defendants in</p>        |
| <p style="text-align: right;">Page 67</p> <p>1 I'm going to raise the fact that you all can't<br/>2 appear to have selected a person to speak.<br/>3 MR. BOEHM: You raise whatever you<br/>4 want. That's fine.<br/>5 MR. PIFKO: Well, you need to be<br/>6 quiet. If you do that again, I'm going to ask<br/>7 for you to leave the room.<br/>8 MR. BOEHM: You can ask all you<br/>9 want, but that's not going to happen.<br/>10 MR. PIFKO: I think the protocol is<br/>11 clear that only one person is allowed to speak<br/>12 at a time.<br/>13 MR. BOEHM: I'm letting you do that.<br/>14 You should let me do the same.<br/>15 MR. PIFKO: No. You're not -- right<br/>16 now we have one counsel here asking the<br/>17 questions.<br/>18 MR. BOEHM: You have my position.<br/>19 You guys can go ahead.<br/>20 MR. PIFKO: No. You're not allowed<br/>21 to make comments right now. You are not allowed<br/>22 to make comments. If you can't abide by the<br/>23 rules, you need to leave the room.<br/>24 MR. BOEHM: I'm not leaving and I am<br/>25 abiding by the rules.</p>                                                                                                                     | <p style="text-align: right;">Page 69</p> <p>1 this deposition.<br/>2 MR. NAEEM: Mr. Pifko, you're not<br/>3 allowed to ask me questions on the record.<br/>4 MR. PIFKO: Well, I need to know<br/>5 because we apparently have an issue with who is<br/>6 handling this deposition. Are you handling the<br/>7 deposition, sir?<br/>8 MR. NAEEM: I think it's pretty<br/>9 clear, but I think if you look --<br/>10 MR. PIFKO: It's not clear to me.<br/>11 MR. NAEEM: -- at the deposition<br/>12 protocol, you will see that two counsel for each<br/>13 subgroup are permitted to conduct the<br/>14 examination of the witness.<br/>15 MR. PIFKO: Not at one time, okay.<br/>16 Check the case law. You cannot double team a<br/>17 deposition.<br/>18 MR. NAEEM: We're not double<br/>19 teaming. He didn't ask the witness a question<br/>20 at all --<br/>21 MR. PIFKO: He's speaking up. He's<br/>22 getting involved in the questions. Come on.<br/>23 MR. NAEEM: -- so as long as we<br/>24 characterize what's going on accurately, we can<br/>25 move on.</p> |

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| <p style="text-align: right;">Page 70</p> <p>1 MR. PIFKO: We have a record.<br/> 2 Everything is being heard. We don't need to<br/> 3 characterize anything. Okay.<br/> 4 MR. NAEEM: You're the one who is<br/> 5 addressing me.<br/> 6 MR. PIFKO: Well, I am because I<br/> 7 need to know -- defendants -- there are a lot of<br/> 8 you here --<br/> 9 MR. BOEHM: If you want to go off<br/> 10 the record --<br/> 11 MR. PIFKO: I don't want to have any<br/> 12 conversations with you off the record. No thank<br/> 13 you.<br/> 14 MR. BOEHM: I'm saying if you want<br/> 15 to stop right now and we can take this up with<br/> 16 Special Master Cohen, we can go off the record<br/> 17 to do that, if that's what you want to do. I'm<br/> 18 not asking to do that yet. I'm telling you my<br/> 19 position is if the objections continue in the<br/> 20 way they have gone so far, I'm going to ask to<br/> 21 do that. That's all I'm saying right now.<br/> 22 MR. PIFKO: Well, I'm saying -- do I<br/> 23 have an agreement that only -- when one counsel<br/> 24 is asking questions, only one person is going to<br/> 25 speak on behalf of defendants? If I don't have</p> | <p style="text-align: right;">Page 72</p> <p>1 council?<br/> 2 MR. PIFKO: Objection. Vague.<br/> 3 A. I don't recall specifically.<br/> 4 Q. Any legislation passed while you<br/> 5 were on city council that was meant to address<br/> 6 substance abuse issues?<br/> 7 A. I don't recall specifically.<br/> 8 Q. Any investigations or hearings that<br/> 9 you recall that related to substance abuse<br/> 10 issues?<br/> 11 A. I don't recall specifically.<br/> 12 Q. And is it fair for me to assume that<br/> 13 when you have no recall of specific business of<br/> 14 city council on substance abuse issues, that<br/> 15 answer includes opioid-related issues, because I<br/> 16 could ask the same questions all over again? So<br/> 17 when I say "substance abuse issues," do you<br/> 18 understand that to mean opioid-related issues?<br/> 19 MR. PIFKO: I think for clarity<br/> 20 maybe you should just ask those questions again.<br/> 21 MR. NAEEM: Sure.<br/> 22 Q. Do you recall while you were on city<br/> 23 council that members of ward 15 were suffering<br/> 24 from opioid abuse issues?<br/> 25 MR. PIFKO: Objection. Foundation.</p>                                                                                                                                                 |
| <p style="text-align: right;">Page 71</p> <p>1 that agreement, we're going to go to Cohen now<br/> 2 and get that clarity because this is not<br/> 3 appropriate.<br/> 4 MR. BOEHM: I'm going to make<br/> 5 objections as I see fit.<br/> 6 MR. PIFKO: Okay. We're going to go<br/> 7 off the record and we're going to call him.<br/> 8 THE VIDEOGRAPHER: Off the record.<br/> 9 The time is 10:21.<br/> 10 (Recess had.)<br/> 11 THE VIDEOGRAPHER: Back on the<br/> 12 record. The time is 10:40.<br/> 13 BY MR. NAEEM:<br/> 14 Q. Ms. Gordon, I want to tie off where<br/> 15 I believe I think we were before we went off the<br/> 16 record. During your tenure on city council from<br/> 17 1997 to 2005 were you aware of citizens in ward<br/> 18 15 who had substance abuse issues?<br/> 19 A. Substance abuse issues, yes.<br/> 20 Q. Was that something that city council<br/> 21 was involved in assessing?<br/> 22 A. I don't recall.<br/> 23 Q. Let me strike that.<br/> 24 Was that an issue -- any issue<br/> 25 related to substance abuse that came before city</p>                                                                                                        | <p style="text-align: right;">Page 73</p> <p>1 A. I have recollection of people who<br/> 2 were addicted and hearing firsthand accounts of<br/> 3 individuals who were suffering from addiction,<br/> 4 families who had a loved one and families who<br/> 5 were dealing with this issue. I have -- I have<br/> 6 recollection of that for sure.<br/> 7 Q. So those were hearings that were<br/> 8 conducted by city council during your tenure?<br/> 9 A. That was one-on-one interaction with<br/> 10 individuals in the community they represented,<br/> 11 people who attended community meetings, people<br/> 12 that I met with for a variety of reasons. Part<br/> 13 of my job was to meet with families. I went to<br/> 14 community meetings multiple times a week and<br/> 15 heard about what was going on on the street, in<br/> 16 the community, neighborhoods.<br/> 17 Q. Did city council during your tenure<br/> 18 between 1997 and 2005 discuss any legislation<br/> 19 directed -- intended to be directed towards<br/> 20 addressing these opioid-related issues?<br/> 21 A. I don't recall that specifically.<br/> 22 Q. Did city council during that time<br/> 23 frame have any -- conduct any investigations,<br/> 24 public hearings of that sort regarding<br/> 25 opioid-related issues?</p> |

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| <p style="text-align: right;">Page 74</p> <p>1 A. I don't have recollection.</p> <p>2 Q. Any discussions at city council</p> <p>3 between 1997 and 2005 about funding for</p> <p>4 opioid-related treatment or education?</p> <p>5 A. I don't recall.</p> <p>6 Q. When did you -- well, strike that.</p> <p>7 Let me start at the top.</p> <p>8 What is your current title with the</p> <p>9 City of Cleveland?</p> <p>10 A. I'm the director of the Cleveland</p> <p>11 Department of Public Health.</p> <p>12 Q. When did you take that -- take on</p> <p>13 that role?</p> <p>14 A. I began that on June 13th of 2016.</p> <p>15 Q. How did you come to apply for or be</p> <p>16 approached about taking on the role of director</p> <p>17 of public health?</p> <p>18 MR. PIFKO: Objection. Calls for a</p> <p>19 narrative. Overbroad.</p> <p>20 A. I knew that the position had been</p> <p>21 vacant and that the city was looking to fill</p> <p>22 that position and so I applied. I submitted my</p> <p>23 letter and resume to the city and -- and</p> <p>24 proceeded through that route.</p> <p>25 Q. Do you know why the role was</p> | <p style="text-align: right;">Page 76</p> <p>1 position of director of the Department of Public</p> <p>2 Health?</p> <p>3 A. I do not know.</p> <p>4 Q. So you don't know whether she was</p> <p>5 fired or whether she left voluntarily?</p> <p>6 A. I do not know specifically, no.</p> <p>7 Q. Once you submitted your resume</p> <p>8 seeking the position of director, how did the --</p> <p>9 could you describe how the hiring process went?</p> <p>10 A. Sure.</p> <p>11 I was called in for an interview</p> <p>12 with a panel of individuals, and after that I</p> <p>13 was called back shortly thereafter. I</p> <p>14 understood that I was one of the finalists. And</p> <p>15 the two finalists then had to have an interview</p> <p>16 with the mayor of the City of Cleveland. I had</p> <p>17 that interview, and within a period of time I</p> <p>18 was called and notified that I was being offered</p> <p>19 the position.</p> <p>20 Q. Do you happen to know who the other</p> <p>21 final candidate was? Was that made --</p> <p>22 A. I do not know.</p> <p>23 Q. Did anyone -- were you the first</p> <p>24 choice or did the first choice not accept the</p> <p>25 position? Do you know that?</p> |
| <p style="text-align: right;">Page 75</p> <p>1 available at that time?</p> <p>2 MR. PIFKO: Objection. Calls for</p> <p>3 speculation. Foundation.</p> <p>4 Q. And the question was do you know why</p> <p>5 that role was available.</p> <p>6 A. There was nobody filling that role.</p> <p>7 Q. Do you know why the predecessor had</p> <p>8 left the Department of Cleveland Health?</p> <p>9 MR. PIFKO: Objection. Calls for</p> <p>10 speculation. Foundation.</p> <p>11 A. I do not know.</p> <p>12 Q. Do you know who that person was, the</p> <p>13 immediate prior director before you were hired?</p> <p>14 A. Who had that position specifically,</p> <p>15 yes, I do know that person's name.</p> <p>16 Q. What was that person's name?</p> <p>17 A. Her name is Toinette Parilla.</p> <p>18 Q. Can you spell her last name, if you</p> <p>19 know?</p> <p>20 A. I believe it's P-a-r-i-l-l-a.</p> <p>21 Q. And do you know how long the</p> <p>22 position had been vacant prior to you taking on</p> <p>23 the directorship?</p> <p>24 A. About a year.</p> <p>25 Q. Do you know why Ms. Parilla left the</p>                           | <p style="text-align: right;">Page 77</p> <p>1 A. I don't know that.</p> <p>2 Q. So you interviewed with a panel.</p> <p>3 Was that a panel of City of Cleveland employees?</p> <p>4 A. Yes.</p> <p>5 Q. Do you recall who they were, at</p> <p>6 least their role within the City of Cleveland,</p> <p>7 if not their names?</p> <p>8 A. Yes.</p> <p>9 Q. Can you tell us that, please?</p> <p>10 A. Of the four panelists?</p> <p>11 Q. Yes.</p> <p>12 A. Sure. Natoya Walker Minor, Tracy</p> <p>13 Martin Thompson, Martin Flask and Barry Withers.</p> <p>14 Q. Okay. Can you let us know what</p> <p>15 roles those people had at the time they were</p> <p>16 interviewing you?</p> <p>17 A. Sure.</p> <p>18 Natoya Walker Minor is the chief of</p> <p>19 public affairs, Tracy Martin Thompson and Martin</p> <p>20 Flask are special assistants to the mayor, and</p> <p>21 Barry Withers also has a key position. I'm not</p> <p>22 entirely sure what his title is.</p> <p>23 Q. To be clear -- I want to make sure I</p> <p>24 understood what you said about your awareness of</p> <p>25 the position. Did somebody approach you about</p>                                                                       |

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| <p style="text-align: right;">Page 78</p> <p>1 this open position before you applied?</p> <p>2 A. We were aware that the position had</p> <p>3 been -- had been vacated and available and that</p> <p>4 the city was looking for somebody to fill that</p> <p>5 position.</p> <p>6 Q. Okay. And I wasn't specific enough.</p> <p>7 I apologize. Did somebody from the City of</p> <p>8 Cleveland approach you about seeing whether you</p> <p>9 were interested in taking the role of director</p> <p>10 of public health?</p> <p>11 A. No.</p> <p>12 Q. Was it ultimately Mayor Jackson's</p> <p>13 decision as to who to hire in that role?</p> <p>14 MR. PIFKO: Objection. Calls for</p> <p>15 speculation. Foundation.</p> <p>16 A. I believe that's why the interview</p> <p>17 is with the mayor and then a decision is made.</p> <p>18 Q. Do you know whose final decision it</p> <p>19 was to hire you as the director of Cleveland</p> <p>20 Public Health?</p> <p>21 A. I don't know specifically.</p> <p>22 Q. But you believe it was Mayor</p> <p>23 Jackson's decision?</p> <p>24 MR. PIFKO: Objection. Speculation.</p> <p>25 A. I believe.</p> | <p style="text-align: right;">Page 80</p> <p>1 Q. How did that process work?</p> <p>2 A. The commissioner of health position</p> <p>3 -- and we posted for the position, which is an</p> <p>4 internal mechanism. She, along with others,</p> <p>5 applied for the position. We reviewed resumes.</p> <p>6 I had the ability to narrow down some of my</p> <p>7 recommendations. She then interviewed with</p> <p>8 myself and chief of public affairs and Tracy</p> <p>9 Martin Thompson, who is, again, the special</p> <p>10 assistant to the mayor, along with the</p> <p>11 finalists. The two final recommendations are</p> <p>12 then brought to the mayor. The mayor does</p> <p>13 interview those two top finalists and makes a</p> <p>14 recommendation of -- of whether or not they</p> <p>15 support the candidates or whether we should</p> <p>16 continue the search.</p> <p>17 Q. And in that specific situation with</p> <p>18 Ms. Sersis -- did I get that right?</p> <p>19 A. You did not.</p> <p>20 Q. No. Could you say it again, please?</p> <p>21 A. Her name is Persis Sosiak.</p> <p>22 Q. In that instance did Mayor Jackson</p> <p>23 give the authority to hire Ms. Sosiak?</p> <p>24 A. He did.</p> <p>25 Q. When you were interviewing with the</p> |
| <p style="text-align: right;">Page 79</p> <p>1 Q. Now, once -- in your role as</p> <p>2 director, are you free to hire people within the</p> <p>3 Department of Health without oversight from</p> <p>4 anyone else in the City of Cleveland?</p> <p>5 A. No, not necessarily.</p> <p>6 Q. As a general matter, and, for</p> <p>7 example, I might not pronounce her name</p> <p>8 correctly, but Persis Sosiak, do you know who</p> <p>9 she is?</p> <p>10 A. I do.</p> <p>11 Q. Does she work in your department?</p> <p>12 A. She does.</p> <p>13 Q. Does she work under you?</p> <p>14 A. Yes.</p> <p>15 Q. So she reports to you?</p> <p>16 A. She does.</p> <p>17 Q. Was she hired by the City of</p> <p>18 Cleveland after you became the director of</p> <p>19 public health?</p> <p>20 A. Yes.</p> <p>21 Q. Very briefly -- I don't know the</p> <p>22 details about her specifically -- were you able</p> <p>23 to hire her without the oversight of anybody</p> <p>24 else at the City of Cleveland?</p> <p>25 A. No.</p>                                                                                                                           | <p style="text-align: right;">Page 81</p> <p>1 initial panel or with -- having a discussion</p> <p>2 with Mayor Jackson prior to being hired as</p> <p>3 director, was there any discussion about</p> <p>4 specific public health issues that were being</p> <p>5 faced by the City of Cleveland?</p> <p>6 A. Yes.</p> <p>7 Q. Was there any specific discussion</p> <p>8 about the opioid abuse and addiction issues</p> <p>9 during that interview process?</p> <p>10 A. Yes.</p> <p>11 Q. Who did you have that discussion</p> <p>12 with?</p> <p>13 A. That discussion came up in the panel</p> <p>14 and then as well in the interview I had with the</p> <p>15 mayor.</p> <p>16 Q. And what was -- what was generally</p> <p>17 described during that process to you?</p> <p>18 A. I was asked what I saw as some of</p> <p>19 the top issues facing the City of Cleveland and</p> <p>20 I listed that as one of them.</p> <p>21 Q. And were you given further</p> <p>22 information about that issue from any of the</p> <p>23 panelists or Mayor Jackson during this</p> <p>24 discussion?</p> <p>25 A. What type of information?</p>                                                                                                                                     |

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| <p style="text-align: right;">Page 82</p> <p>1 Q. Statistics about the scope of the</p> <p>2 problem in the City of Cleveland or treatment</p> <p>3 programs that would be administered through the</p> <p>4 Department of Public Health.</p> <p>5 A. I didn't to my recollection.</p> <p>6 Q. So this is something you</p> <p>7 affirmatively brought to the table during the</p> <p>8 interview process? I think that's what you just</p> <p>9 said.</p> <p>10 A. Yes.</p> <p>11 Q. And where did you become -- strike</p> <p>12 that.</p> <p>13 How did you become available of</p> <p>14 those issues? How did you become aware of those</p> <p>15 issues?</p> <p>16 A. I'm a consumer of news and</p> <p>17 information and engaged in the community. I've</p> <p>18 been in this field and there's a lot that's been</p> <p>19 written on it, and especially here in Ohio</p> <p>20 around this time the Ohio Attorney General had</p> <p>21 put out a report. There was information in the</p> <p>22 newspaper, local newspaper, and data that was</p> <p>23 available through organizations that look at</p> <p>24 issues pertinent to this community.</p> <p>25 Q. Were you educating yourself as part</p> | <p style="text-align: right;">Page 84</p> <p>1 A. Yes.</p> <p>2 Q. How far back had you been aware of</p> <p>3 opioids as an issue that the City of Cleveland</p> <p>4 was facing?</p> <p>5 A. I can't say specifically, but I know</p> <p>6 that over the course of years this has been an</p> <p>7 issue and something that I had seen and read</p> <p>8 about and, again, it had been written about in</p> <p>9 the local newspaper and -- and part of</p> <p>10 information that I would get just as part of my</p> <p>11 job and as a concerned citizen.</p> <p>12 Q. When you referred to the Ohio</p> <p>13 Attorney General report when describing the</p> <p>14 news, as a consumer of news that you were aware</p> <p>15 of during the application process, what specific</p> <p>16 report are you referring to?</p> <p>17 A. I believe that that came out in</p> <p>18 2014. There was a lot of publicity around the</p> <p>19 release of this report and this information, and</p> <p>20 in an attempt to try to address what had really</p> <p>21 become this massive issue here in this</p> <p>22 community.</p> <p>23 Q. Do you recall the title of the</p> <p>24 report?</p> <p>25 A. I don't recall the title of the</p> |
| <p style="text-align: right;">Page 83</p> <p>1 of the application process or is this</p> <p>2 information you knew prior to even deciding to</p> <p>3 apply for this position?</p> <p>4 MR. PIFKO: Objection. Compound.</p> <p>5 Objection to the extent the question assumes</p> <p>6 facts not in evidence.</p> <p>7 A. I was doing it both, as someone who</p> <p>8 is concerned about this community and the</p> <p>9 impacts, issues pertaining to this community as</p> <p>10 well as work that I do in this area.</p> <p>11 Q. Let me ask this a little</p> <p>12 differently.</p> <p>13 So you became employed by the City</p> <p>14 of Cleveland as director of the Department of</p> <p>15 Public Health on June 13th, 2016?</p> <p>16 A. Correct.</p> <p>17 Q. When did you apply for the position?</p> <p>18 Month and year is fine.</p> <p>19 A. It was earlier in 2016. Maybe a</p> <p>20 couple months prior.</p> <p>21 Q. Prior to that couple of months</p> <p>22 before you applied, were you aware as a consumer</p> <p>23 of news about some of these opioid-related</p> <p>24 reports from the Ohio Attorney General or local</p> <p>25 news reports?</p>                                      | <p style="text-align: right;">Page 85</p> <p>1 report, but I know it was a report that came out</p> <p>2 of the Ohio Attorney General's Office.</p> <p>3 Q. And what specifically was the</p> <p>4 subject matter of the report?</p> <p>5 A. It was about -- it was about</p> <p>6 opiates. It was about prescribing practices.</p> <p>7 It was about the impact in our community,</p> <p>8 overdoses, looking at ways that the community</p> <p>9 could respond to this issue.</p> <p>10 Q. Do you think it might have been the</p> <p>11 Ohio Task Force on opioid abuse?</p> <p>12 A. Might have been. I don't recall for</p> <p>13 sure the title of it.</p> <p>14 - - - - -</p> <p>15 (Thereupon, Deposition Exhibit 2,</p> <p>16 Ohio Prescription Drug Abuse Task</p> <p>17 Force Final Report, Task Force</p> <p>18 Recommendations, dated October 1,</p> <p>19 2010, was marked for purposes of</p> <p>20 identification.)</p> <p>21 - - - - -</p> <p>22 Q. I'm handing you what's been marked</p> <p>23 for the deposition as Exhibit 2. Do you think</p> <p>24 this might have been the report you were just</p> <p>25 referring to? Well, first of all, have you seen</p>                                                     |

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| <p style="text-align: right;">Page 86</p> <p>1 that report before?</p> <p>2 A. I can't say specifically. This is</p> <p>3 not the report I was referring to.</p> <p>4 Q. Okay. That's all I need to know for</p> <p>5 now. So whatever it was we were just talking</p> <p>6 about, it's not your recollection that Exhibit 2</p> <p>7 is the report you were referring to?</p> <p>8 A. Correct.</p> <p>9 Q. As part of your role with the</p> <p>10 Cleveland Department of Public Health, do you</p> <p>11 speak to Mayor Jackson on opioid-related issues?</p> <p>12 A. I have presented at cabinet where</p> <p>13 the mayor is -- holds weekly meetings, and I</p> <p>14 have presented there, yes.</p> <p>15 Q. How often do you present at cabinet</p> <p>16 where opioid-related issues are discussed?</p> <p>17 A. I've done this a few times over the</p> <p>18 last two plus years that I've been there.</p> <p>19 Q. So these are ad hoc as opposed to</p> <p>20 periodic scheduled updates for Mayor Jackson?</p> <p>21 A. The cabinet meets weekly and it's</p> <p>22 the entire cabinet, about 35 people, who attend,</p> <p>23 and often I am asked to present or answer</p> <p>24 questions, but the schedule of who speaks and on</p> <p>25 what topic is not -- is not scheduled in</p> | <p style="text-align: right;">Page 88</p> <p>1 Q. Handwritten notes?</p> <p>2 A. Sometimes they're handwritten notes,</p> <p>3 but often I'll type them up and bring them just</p> <p>4 so I can read them.</p> <p>5 Q. Do you recall in this instance of</p> <p>6 the fall of 2016 whether you had handwritten or</p> <p>7 typed notes for that meeting?</p> <p>8 A. Often I would prepare for the</p> <p>9 meeting in case I was called upon to present</p> <p>10 information to cabinet, so sometimes I would</p> <p>11 have that, those notes handwritten, and often I</p> <p>12 was bringing -- produced notes that I would have</p> <p>13 typed up.</p> <p>14 Q. Do you recall seeing in the</p> <p>15 production or the materials you found this</p> <p>16 weekend and turned over to your attorney, seeing</p> <p>17 any of those kind of written materials when you</p> <p>18 were cleaning your office, handwritten</p> <p>19 materials?</p> <p>20 MR. PIFKO: Objection. Vague.</p> <p>21 A. No, I did not.</p> <p>22 Q. Do you recall what the topic of the</p> <p>23 conversation was in the fall of 2016 in the</p> <p>24 presentation you gave specifically?</p> <p>25 A. To some degree. So I was presenting</p>                                                                                                                                             |
| <p style="text-align: right;">Page 87</p> <p>1 advance.</p> <p>2 Q. So you attend the meetings and you</p> <p>3 might not know before you appear that</p> <p>4 opioid-related issues come up?</p> <p>5 A. That could be possible, correct.</p> <p>6 Q. Do you recall ever presenting</p> <p>7 written materials for one of these cabinet</p> <p>8 meetings on opioid-related issues?</p> <p>9 A. Yes.</p> <p>10 Q. When do you recall that that</p> <p>11 happened?</p> <p>12 A. Early on in my tenure, so fall of</p> <p>13 2016, late summer, early fall I was asked to</p> <p>14 present on this particular issue. Public safety</p> <p>15 and I were asked to come up with a set of</p> <p>16 recommendations for the mayor pertaining to</p> <p>17 opiates, opioid-related overdose deaths,</p> <p>18 fatalities, et cetera.</p> <p>19 Q. Did you prepare a PowerPoint</p> <p>20 presentation?</p> <p>21 A. I did not.</p> <p>22 Q. What kind of materials did you</p> <p>23 prepare for that meeting?</p> <p>24 A. These are oral presentations, so I</p> <p>25 just would have had my notes.</p>                                                                                                                                                                                                   | <p style="text-align: right;">Page 89</p> <p>1 information from the medical examiners in terms</p> <p>2 of a number of overdose deaths, what they</p> <p>3 pertained to, may have also had information on</p> <p>4 the number of issuances and doses of Narcan or</p> <p>5 naloxone and what public safety was using, and</p> <p>6 going through -- we also would have provided how</p> <p>7 many patients we had seen who had come into our</p> <p>8 Project DAWN clinics; also, what other</p> <p>9 information was at that point available so that</p> <p>10 I was giving the mayor and cabinet as much</p> <p>11 information as we possibly could.</p> <p>12 Q. And I thought I heard you say that</p> <p>13 you presented with somebody else from the City</p> <p>14 of Cleveland this data, maybe a different</p> <p>15 department. Did I hear that correctly?</p> <p>16 A. Well, often we work in conjunction</p> <p>17 with other departments, and public safety is one</p> <p>18 department where I've worked very closely on</p> <p>19 this particular issue.</p> <p>20 Q. And I want to be specific to this</p> <p>21 meeting, the fall of 2016. Did you co-present</p> <p>22 this opioid-related data with somebody from</p> <p>23 public safety?</p> <p>24 A. I don't recall that we co-presented,</p> <p>25 but it would have been information that would</p> |

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| <p style="text-align: right;">Page 90</p> <p>1 have been provided from them. We met prior to<br/>2 to make sure that I had information to present<br/>3 at the mayor's cabinet.<br/>4 Q. And which functions within public<br/>5 safety would have provided this data to you?<br/>6 A. So there -- this would have been<br/>7 public safety administration, also police and<br/>8 EMS and first responders and fire.<br/>9 Q. Is the medical examiner's --<br/>10 actually, that's a county position, correct?<br/>11 A. Medical examiner is a county<br/>12 position, yes.<br/>13 Q. Would you have gotten data from the<br/>14 Cuyahoga County Medical Examiner's office for<br/>15 this presentation of data to the cabinet in the<br/>16 fall of 2016?<br/>17 A. Yes.<br/>18 Q. So do you specifically recall there<br/>19 was discussion, for example, of opioid deaths at<br/>20 that time?<br/>21 A. Yes.<br/>22 Q. You mentioned Project DAWN and you<br/>23 said that some of the data would have related to<br/>24 patients to whom kits were dispensed? I may<br/>25 have heard you wrong. What specifically is</p>     | <p style="text-align: right;">Page 92</p> <p>1 Hospital.<br/>2 Q. So does any of the funding for<br/>3 Project DAWN clinics in the City of Cleveland<br/>4 actually come from the City of Cleveland?<br/>5 MR. PIFKO: Objection. Foundation.<br/>6 A. I can speak to the Project DAWN kits<br/>7 that the Cleveland Department of Public Health<br/>8 offers to the community. That is a program<br/>9 specifically through MetroHealth.<br/>10 Q. Okay. So no City of Cleveland funds<br/>11 are used to purchase the kits that are dispensed<br/>12 by clinics run by the Cleveland Department of<br/>13 Public Health?<br/>14 A. That is -- to the best of my<br/>15 knowledge, that is correct. We fund the staff<br/>16 who work on this project.<br/>17 Q. Is that all they do?<br/>18 MR. PIFKO: Hold on. She was still<br/>19 speaking.<br/>20 Are you done with your answer?<br/>21 THE WITNESS: I'm done with my<br/>22 answer.<br/>23 Q. So the Cleveland Department of<br/>24 Public Health's people who staff these clinics<br/>25 where naloxone kits are dispensed, Narcan, is</p>                      |
| <p style="text-align: right;">Page 91</p> <p>1 Project DAWN?<br/>2 A. Sure.<br/>3 Project DAWN is -- DAWN stands for<br/>4 deaths avoided with naloxone. We, the City of<br/>5 Cleveland, in our clinics we're providing<br/>6 Project DAWN kits, and Project DAWN comes<br/>7 from -- it's a program that Dr. Papp was<br/>8 instrumental in creating, so we are one of the<br/>9 distribution points for those kits, and we would<br/>10 give those out to individuals who visited our<br/>11 clinics.<br/>12 Q. Those clinics do not actually<br/>13 administer Narcan, is that correct, or naloxone?<br/>14 A. It is part of the kit that is<br/>15 distributed with Project DAWN.<br/>16 Q. And I understand that, but this<br/>17 clinic doesn't provide -- actually inject Narcan<br/>18 into patients who are suffering overdoses; is<br/>19 that correct?<br/>20 A. To my knowledge, the clinic has not<br/>21 administered the actual naloxone to a patient,<br/>22 correct. We just provide the kits.<br/>23 Q. Who provides the funding for Project<br/>24 DAWN currently?<br/>25 A. It is a program through Metro</p> | <p style="text-align: right;">Page 93</p> <p>1 that all they do for the Cleveland Department of<br/>2 Public Health?<br/>3 A. No. No. It's just part of their<br/>4 work.<br/>5 Q. How many Cleveland Department of<br/>6 Public Health employees staff those clinics or<br/>7 are authorized to dispense Project DAWN kits?<br/>8 MR. PIFKO: Objection. Compound.<br/>9 A. At this point we have about 20 staff<br/>10 who are trained.<br/>11 Q. Was there a time after you were<br/>12 hired where the clinic was -- the clinics were<br/>13 unable to dispense kits because there wasn't<br/>14 anybody trained to do so?<br/>15 A. There was a time where we had to<br/>16 suspend offering these kits, yes, because we did<br/>17 not have trained staff to be able to provide<br/>18 them.<br/>19 Q. All right. When was that?<br/>20 A. I believe that that was fall of 2017<br/>21 into the beginning of 2018. I don't recall<br/>22 exactly the dates.<br/>23 Q. And prior to fall of 2017, had the<br/>24 Cleveland Department of Public Health been<br/>25 providing Project DAWN kits at its clinics?</p> |

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| <p style="text-align: right;">Page 94</p> <p>1 A. Yes.</p> <p>2 Q. How long prior to that had it been</p> <p>3 doing so?</p> <p>4 MR. PIFKO: Objection. Foundation.</p> <p>5 A. I don't recall exactly how long, but</p> <p>6 it had been for a fair amount of time.</p> <p>7 Q. Was the Cleveland Department of</p> <p>8 Public Health issuing those kits prior to you</p> <p>9 becoming employed as director of the Cleveland</p> <p>10 Department of Public Health?</p> <p>11 MR. PIFKO: Objection. Foundation.</p> <p>12 A. Yes.</p> <p>13 MR. PIFKO: Just make sure you give</p> <p>14 enough time for me to object if I need to say</p> <p>15 something.</p> <p>16 Q. Do you have any data or do you</p> <p>17 recall any data as you sit here regarding how</p> <p>18 many kits the City of Cleveland has dispensed in</p> <p>19 your time with the Cleveland Department of</p> <p>20 Public Health?</p> <p>21 MR. PIFKO: Objection. Compound.</p> <p>22 A. I don't recall.</p> <p>23 Q. Is that information that the</p> <p>24 Cleveland Department of Public Health would have</p> <p>25 access to?</p>                                                                                                  | <p style="text-align: right;">Page 96</p> <p>1 Q. What was that person's name?</p> <p>2 A. The person's name is David Gretick.</p> <p>3 Q. So Mr. Gretick left the Cleveland</p> <p>4 Department of Public Health in the fall of 2017?</p> <p>5 A. Correct.</p> <p>6 Q. Did he take a job elsewhere as a</p> <p>7 City of Cleveland employee to your knowledge?</p> <p>8 MR. PIFKO: Objection. Foundation.</p> <p>9 A. I don't know.</p> <p>10 Q. Was he fired?</p> <p>11 A. He was not fired.</p> <p>12 Q. So he voluntarily terminated his</p> <p>13 employment?</p> <p>14 A. Correct.</p> <p>15 Q. Do you know why?</p> <p>16 MR. PIFKO: Objection. Speculation.</p> <p>17 Foundation.</p> <p>18 A. I do not know why.</p> <p>19 MR. NAEEM: Mr. Pifko, when I ask a</p> <p>20 question about does she know, I don't believe</p> <p>21 foundation is an appropriate objection because I</p> <p>22 am asking her the foundational question.</p> <p>23 MR. PIFKO: Understood.</p> <p>24 MR. NAEEM: Okay. I'm really, you</p> <p>25 know, trying to adjust my questions based on how</p>                                                               |
| <p style="text-align: right;">Page 95</p> <p>1 MR. PIFKO: Objection. Foundation.</p> <p>2 A. We would have access to that.</p> <p>3 Q. And specifically the Cleveland</p> <p>4 Department of Public Health, that's what I'm</p> <p>5 asking about, that data exists somewhere in your</p> <p>6 department?</p> <p>7 A. Most likely, yes.</p> <p>8 Q. Who would you ask if you needed to</p> <p>9 find out that data within the Department of</p> <p>10 Public Health?</p> <p>11 A. I would ask that of Commissioner</p> <p>12 Persis Sisiak.</p> <p>13 Q. Now, going back to this period from</p> <p>14 fall of 2017 to early 2018, how was it -- how</p> <p>15 did it occur that there was no one at the</p> <p>16 Cleveland Department of Public Health remaining</p> <p>17 to dispense those kits?</p> <p>18 MR. PIFKO: Objection to the extent</p> <p>19 the question calls for speculation. Foundation.</p> <p>20 A. There was one individual who was</p> <p>21 trained to provide those kits who left the</p> <p>22 department in the fall of 2017, and when that</p> <p>23 individual left, we realized we did not have</p> <p>24 somebody who was trained to be able to provide</p> <p>25 those kits.</p> | <p style="text-align: right;">Page 97</p> <p>1 this deposition is going to satisfy you. I</p> <p>2 don't seem to be able to do so.</p> <p>3 MR. PIFKO: I'm just protecting my</p> <p>4 record.</p> <p>5 MR. NAEEM: Fair enough.</p> <p>6 Q. Have you talked to David Gretick</p> <p>7 since he terminated his employment with the City</p> <p>8 of Cleveland?</p> <p>9 A. I had one interaction with him after</p> <p>10 he left the department.</p> <p>11 Q. And have you received any</p> <p>12 information from anyone about the circumstances</p> <p>13 regarding why he terminated his employment?</p> <p>14 A. No.</p> <p>15 Q. Was he -- would you consider him a</p> <p>16 disgruntled employee prior to his departure?</p> <p>17 MR. PIFKO: Objection. Vague.</p> <p>18 A. I would not.</p> <p>19 Q. So to be clear about what we're</p> <p>20 talking about, prior to the fall of 2017, the</p> <p>21 Cleveland Department of Health only had one</p> <p>22 person trained to issue Project DAWN kits?</p> <p>23 A. Correct.</p> <p>24 Q. Was that the same situation as when</p> <p>25 you were employed -- became employed in June of</p> |

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| <p style="text-align: right;">Page 98</p> <p>1 2016?</p> <p>2 A. Correct.</p> <p>3 Q. Do you know how long prior to June</p> <p>4 of 2016 he was the only person trained to</p> <p>5 provide Project DAWN kits?</p> <p>6 A. I do not, no.</p> <p>7 Q. Going back generally to the role of</p> <p>8 director of the Cleveland Department of Public</p> <p>9 Health, who do you directly report to? Who is</p> <p>10 your immediate supervisor?</p> <p>11 A. Natoya Walker Minor. She's the</p> <p>12 chief of public affairs.</p> <p>13 Q. And has that been the same person</p> <p>14 since you were employed in June of 2016?</p> <p>15 A. Yes.</p> <p>16 Q. How many direct reports do you have?</p> <p>17 A. I have many.</p> <p>18 Q. All right. Let's take a step back</p> <p>19 and ask or give me a sense -- how is the</p> <p>20 Cleveland Department of Public Health organized?</p> <p>21 And I mean are there separate offices or</p> <p>22 subdepartments within the greater organization.</p> <p>23 A. There are divisions.</p> <p>24 Q. How many?</p> <p>25 A. There are three divisions and also</p>                             | <p style="text-align: right;">Page 100</p> <p>1 most recent one?</p> <p>2 MR. NAEEM: Yes.</p> <p>3 A. Restate the question, please.</p> <p>4 Q. Sure.</p> <p>5 Starting with the revenue from the</p> <p>6 City of Cleveland, how is it that funds are</p> <p>7 allocated from Cleveland to the Department of</p> <p>8 Public Health?</p> <p>9 MR. PIFKO: Objection to the extent</p> <p>10 the question calls for speculation.</p> <p>11 You can answer.</p> <p>12 A. There's an annual budget process.</p> <p>13 We are essentially told that we have a certain</p> <p>14 amount of general revenue fund available to the</p> <p>15 department, essentially the same amount year</p> <p>16 over year, if that's what's available to the</p> <p>17 City overall, and then we also have -- part of</p> <p>18 our budget is also grant funding and fees</p> <p>19 generated through licenses and permits.</p> <p>20 Q. When you say that you are told how</p> <p>21 much your annual budget is going to be and it is</p> <p>22 essentially the same amount, how much is that</p> <p>23 budget amount currently for this fiscal year?</p> <p>24 A. For the general fund?</p> <p>25 Q. From the City of Cleveland, yes.</p> |
| <p style="text-align: right;">Page 99</p> <p>1 the administrative function.</p> <p>2 Q. Does the administration section of</p> <p>3 the Department of Public Health have any role in</p> <p>4 opioid-related issues, whether it's providing</p> <p>5 treatment or collecting statistics, anything at</p> <p>6 all?</p> <p>7 A. In the administrative section?</p> <p>8 Q. Um-hum.</p> <p>9 A. No.</p> <p>10 Q. How many of the three divisions</p> <p>11 touch on opioid-related issues?</p> <p>12 A. Division of Health.</p> <p>13 Q. Is that Ms. Sosiak? Is she the</p> <p>14 commissioner of that division?</p> <p>15 A. Correct. Yes.</p> <p>16 Q. What are the other two divisions?</p> <p>17 A. Division of Environment, Division of</p> <p>18 Air Quality.</p> <p>19 Q. How does the budget process work for</p> <p>20 the Cleveland Department of Public Health? And</p> <p>21 to start off, how is it that funds are allocated</p> <p>22 to the Cleveland Department of Public Health</p> <p>23 from the Cleveland's general fund?</p> <p>24 MR. PIFKO: Sorry. You asked two</p> <p>25 questions there. Are we just going with the</p> | <p style="text-align: right;">Page 101</p> <p>1 A. It's a little over -- I believe it's</p> <p>2 a little over 8 million dollars.</p> <p>3 Q. And so that's for the 2018 budget</p> <p>4 year?</p> <p>5 A. Correct.</p> <p>6 Q. And so you said essentially the same</p> <p>7 amount. I need to know from you taking the</p> <p>8 position in 2016 to the current fiscal year has</p> <p>9 it changed or did it change.</p> <p>10 A. It changed somewhat, yes.</p> <p>11 Q. All right. So what was it prior to</p> <p>12 this current fiscal year?</p> <p>13 A. I don't recall exactly how much it</p> <p>14 was in 2016 when I -- when I joined.</p> <p>15 Q. How about 2017?</p> <p>16 A. It changed in 2017 as a result of</p> <p>17 the increase in income tax after a ballot issue</p> <p>18 in 2017, more than a million dollar difference</p> <p>19 that came into the department through 21 new</p> <p>20 staff under the general revenue fund or paid for</p> <p>21 under the general revenue.</p> <p>22 Q. So we're talking about 2017,</p> <p>23 correct?</p> <p>24 A. Correct.</p> <p>25 Q. All right. What was that number</p>                                                                              |

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| <p style="text-align: right;">Page 102</p> <p>1 then?</p> <p>2 A. It was over a million dollars. I</p> <p>3 don't know specifically how much it was. I</p> <p>4 don't recall.</p> <p>5 Q. Over a -- a million dollars over</p> <p>6 what?</p> <p>7 A. In additional staff for the</p> <p>8 Cleveland Department of Public Health.</p> <p>9 Q. Okay. So you're the director of the</p> <p>10 Cleveland Department of Public Health, correct?</p> <p>11 We've established that.</p> <p>12 A. Yes.</p> <p>13 Q. All right. And is preparing a</p> <p>14 budget for your department one of the roles and</p> <p>15 responsibilities you have?</p> <p>16 A. Yes, it is.</p> <p>17 Q. Is being aware of the amount of</p> <p>18 funds directed from the City of Cleveland</p> <p>19 general fund to your department within your</p> <p>20 roles and responsibilities?</p> <p>21 A. It is.</p> <p>22 Q. All right. So what is the top line</p> <p>23 item for the amount of money allocated from the</p> <p>24 City of Cleveland general revenue fund to the</p> <p>25 Cleveland Department of Health in 2017?</p>                                      | <p style="text-align: right;">Page 104</p> <p>1 Q. So, for example, when the number</p> <p>2 went up from 2016 to 2017 by about a million</p> <p>3 dollars, that was to hire the 21 new staff</p> <p>4 members you talked about?</p> <p>5 A. Correct. Salaries and benefits,</p> <p>6 yes.</p> <p>7 Q. And when 21 new staffers like that</p> <p>8 come into the Cleveland Department of Public</p> <p>9 Health, are they assigned to a particular</p> <p>10 division?</p> <p>11 MR. PIFKO: Objection. Incomplete</p> <p>12 hypothetical.</p> <p>13 A. There were -- yes, they were</p> <p>14 assigned to specific divisions.</p> <p>15 Q. How many of those were assigned to</p> <p>16 the Division of Health?</p> <p>17 A. Seven.</p> <p>18 Q. How many of those seven are</p> <p>19 currently doing -- are currently performing</p> <p>20 functions related to the opioid abuse and</p> <p>21 addiction crisis?</p> <p>22 A. I -- I don't know specifically the</p> <p>23 number that are -- I don't know specifically.</p> <p>24 Q. Between 2016 and 2017, during the</p> <p>25 budgeting process, was it the Cleveland</p>                                                                                        |
| <p style="text-align: right;">Page 103</p> <p>1 MR. PIFKO: Objection. Vague.</p> <p>2 A. In 2017 it was a little over 8</p> <p>3 million dollars. I don't know exactly how much</p> <p>4 it is down to the penny.</p> <p>5 Q. Is it roughly the same amount as it</p> <p>6 is this current year, the 8 million dollars?</p> <p>7 A. Correct, 2017, 2018. Correct.</p> <p>8 Q. And then if we work back to 2016,</p> <p>9 you said, I believe, that it was an increase of</p> <p>10 about a million dollars from the prior year, so</p> <p>11 2016 would be roughly 7 million dollars?</p> <p>12 A. One could surmise, yes.</p> <p>13 Q. Would you surmise?</p> <p>14 MR. PIFKO: Objection. Asked and</p> <p>15 answered.</p> <p>16 A. A million plus increase in 2017 from</p> <p>17 2016, yes.</p> <p>18 Q. And what are the things that the</p> <p>19 Cleveland Department of Public Health uses money</p> <p>20 allocated from Cleveland's general revenue for</p> <p>21 in your department?</p> <p>22 MR. PIFKO: Objection. Overbroad.</p> <p>23 Vague.</p> <p>24 A. The majority of those funds are for</p> <p>25 staffing, for people.</p> | <p style="text-align: right;">Page 105</p> <p>1 Department of Public Health that asked the City</p> <p>2 of Cleveland for more money to hire more staff?</p> <p>3 A. Much of this was decided prior to me</p> <p>4 joining, and decisions made of what positions</p> <p>5 and where these positions were going to go were</p> <p>6 predetermined prior to me joining the</p> <p>7 department.</p> <p>8 Q. Well, as the director of public</p> <p>9 health from June 2016 forward would you have</p> <p>10 wanted to educate yourself about those</p> <p>11 initiatives that were undertaken before you took</p> <p>12 the job?</p> <p>13 MR. PIFKO: Objection.</p> <p>14 Argumentative.</p> <p>15 A. I've been educating myself every</p> <p>16 single day about every issue pertaining to the</p> <p>17 department.</p> <p>18 Q. And when you took the position in</p> <p>19 June of 2016, did you review the initiatives or</p> <p>20 the request for additional staffing for the</p> <p>21 Cleveland Department of Public Health?</p> <p>22 A. I did.</p> <p>23 Q. And do you have any recollection</p> <p>24 regarding why the Cleveland Department of Public</p> <p>25 Health was requesting 21 new staffers?</p> |

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| <p style="text-align: right;">Page 106</p> <p>1 A. I did. Much of it was because the<br/>2 department had seen so many cuts in previous<br/>3 years and was down so many staff in number of<br/>4 program areas. We're always in need of<br/>5 resources and staffing to address the multiple<br/>6 issues in the community and it had seen a<br/>7 decline in staff and, as such, these were some<br/>8 of the issues that went into deciding where<br/>9 staff was needed in this enhanced budget.<br/>10 Q. So currently -- strike that.<br/>11 Going back to that point in time<br/>12 when you were reviewing the information related<br/>13 to requests for additional staffing, during the<br/>14 early portion of your employment in June of 2016<br/>15 was there any discussion of the need to hire<br/>16 people due to opioid-related programming or<br/>17 other issues that your department was going to<br/>18 address?<br/>19 A. I need you to rephrase the question.<br/>20 Q. Sure.<br/>21 We've been talking about the work<br/>22 you were doing to get yourself up to speed when<br/>23 you took the position in 2016. Do you recall<br/>24 generally we've been talking about that?<br/>25 A. Yes.</p> | <p style="text-align: right;">Page 108</p> <p>1 amount of them are working in the area of<br/>2 Healthy Cleveland, which has some programming in<br/>3 this area, epidemiology and HIV, and all of this<br/>4 has broader implications on -- on this issue in<br/>5 the community.<br/>6 Q. All right. Are those employees<br/>7 working on anything else that touches on the<br/>8 opioid crisis other than Healthy Cleveland?<br/>9 MR. PIFKO: Objection. Foundation.<br/>10 A. Epidemiology for sure, and the staff<br/>11 in HIV have had to be involved with this issue<br/>12 as well just as we are all focused on -- on all<br/>13 the issues pertaining to the City of Cleveland.<br/>14 Q. And so when you refer to<br/>15 epidemiology, are you referring back to those<br/>16 three employees that are currently in the<br/>17 epidemiology department and the fact that they<br/>18 were hired since you took the position? Strike<br/>19 that. Let me start over again.<br/>20 A. Thank you.<br/>21 Q. Of the seven new employees in the<br/>22 Division of Health, were any of those<br/>23 epidemiologists you listed out for me earlier<br/>24 that are currently employed?<br/>25 A. Yes.</p> |
| <p style="text-align: right;">Page 107</p> <p>1 Q. And what we were talking about<br/>2 specifically was the request to increase<br/>3 staffing that had been done prior to you<br/>4 becoming employed in June of 2016. Do you<br/>5 recall that?<br/>6 A. Yes.<br/>7 Q. All right. Now, what I'm asking is<br/>8 in whatever you reviewed to get yourself up to<br/>9 speed on that particular issue, was there any<br/>10 discussion sent from the Cleveland Department of<br/>11 Public Health to the City of Cleveland<br/>12 indicating that the need for additional staffers<br/>13 was related to the opioid-related -- to<br/>14 opioid-related programming being done by the<br/>15 Cleveland Department of Public Health?<br/>16 MR. PIFKO: Objection. Foundation.<br/>17 A. I don't recall specifically.<br/>18 Q. And you don't -- as far as the seven<br/>19 new staffers that have been assigned to the<br/>20 Division of Health, you don't know whether --<br/>21 well, strike that. You don't know how many of<br/>22 them are involved in Cleveland Department of<br/>23 Public Health activities related to the opioid<br/>24 crisis?<br/>25 A. I can't say specifically, but a fair</p>                 | <p style="text-align: right;">Page 109</p> <p>1 Q. How many of them?<br/>2 A. At least one.<br/>3 Q. Of the other two that are currently<br/>4 employed, were they employed at the time you<br/>5 took your position in June of 2016?<br/>6 A. No.<br/>7 Q. So all three of them have been hired<br/>8 under your directorship?<br/>9 A. Correct.<br/>10 Q. And what is the role of your<br/>11 epidemiologists with respect to the opioid<br/>12 crisis?<br/>13 MR. PIFKO: Objection. Overbroad.<br/>14 You can answer.<br/>15 A. Epidemiologists are tasked with<br/>16 reviewing, analyzing data, looking at trends,<br/>17 looking at any kind of reports, any kind of<br/>18 analysis that has been done on issues pertaining<br/>19 to public health and health and, you know,<br/>20 impacts in our community. They are on task<br/>21 forces. They attend a lot of meetings. They<br/>22 bring information to us in terms of things that<br/>23 we need to pay attention to. They work directly<br/>24 with the Ohio Department of Health, so they're<br/>25 analyzing, reviewing reports that are generated</p>                                                                                        |

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| <p style="text-align: right;">Page 110</p> <p>1 from them as well. So their purpose is to make<br/> 2 sure that we are aware of what's going on, and<br/> 3 to the best of our ability, advocating for what<br/> 4 needs to be done in order to address these<br/> 5 issues and just making us aware of, again,<br/> 6 what's going on in the community.<br/> 7 THE WITNESS: Can I take a break,<br/> 8 please?<br/> 9 MR. PIFKO: Yes.<br/> 10 THE VIDEOGRAPHER: Going off the<br/> 11 record. It's 11:32.<br/> 12 (Recess had.)<br/> 13 THE VIDEOGRAPHER: Back on the<br/> 14 record. The time is 11:52.<br/> 15 MR. PIFKO: Real quick, it's a<br/> 16 little early for lunch, so I thought we would go<br/> 17 maybe not like a full hour and we can break for<br/> 18 lunch so people don't get too hungry.<br/> 19 MR. NAEEM: Yes. You let me know.<br/> 20 BY MR. NAEEM:<br/> 21 Q. Ms. Gordon, at the time we went off<br/> 22 the record, we were talking about the<br/> 23 epidemiologists who are employed by the<br/> 24 Department of Public Health. Do you recall<br/> 25 generally?</p> | <p style="text-align: right;">Page 112</p> <p>1 and addiction task forces they participate on.<br/> 2 You mentioned Cuyahoga County. Are there any<br/> 3 others?<br/> 4 A. Not to my knowledge, and, yeah,<br/> 5 they're given information from that committee,<br/> 6 yeah, from that task force, yes.<br/> 7 Q. I'm sorry. They're given<br/> 8 information from that task force or they provide<br/> 9 information to that task force?<br/> 10 MR. PIFKO: Objection. Compound.<br/> 11 A. I don't know specifically if they're<br/> 12 giving information directly to the task force.<br/> 13 Q. So what is your understanding of the<br/> 14 role of your epidemiologists in the Cuyahoga<br/> 15 County Opioid Task Force?<br/> 16 A. It is my understanding that they<br/> 17 have information that is provided from the task<br/> 18 force. I believe that they receive e-mails<br/> 19 from -- from that task force.<br/> 20 Q. Do they provide data --<br/> 21 MR. PIFKO: Are you done answering?<br/> 22 A. I don't -- I don't recall if there's<br/> 23 any -- what else specifically.<br/> 24 Q. Do you know whether or not they<br/> 25 provide Cleveland data regarding abuse -- opioid</p>          |
| <p style="text-align: right;">Page 111</p> <p>1 A. Generally, yes.<br/> 2 Q. You said one of the things they do<br/> 3 is they look for trends. They are looking for<br/> 4 more than just opioid trends with their job at<br/> 5 the City of Cleveland, correct?<br/> 6 A. Correct.<br/> 7 Q. So it could be influenza trends?<br/> 8 A. Correct.<br/> 9 Q. They're not specialists on opioid<br/> 10 abuse and addiction?<br/> 11 A. These are not, no.<br/> 12 Q. You mentioned that they participate<br/> 13 in task forces. Do you recall saying that?<br/> 14 A. Yes.<br/> 15 Q. And are those task forces devoted to<br/> 16 opioid abuse and addiction?<br/> 17 A. They're -- I know that they have<br/> 18 been involved with the Cuyahoga County Opiate<br/> 19 Addiction Task Force. I know that they're<br/> 20 involved with a number of things throughout the<br/> 21 community.<br/> 22 Q. And I just want to get an<br/> 23 understanding of when you said task forces --<br/> 24 we're here to talk about opioid abuse and<br/> 25 addiction. I want to know which opioid abuse</p> | <p style="text-align: right;">Page 113</p> <p>1 abuse and addiction to the task force?<br/> 2 A. I don't know for sure.<br/> 3 Q. Do you know what sources of data<br/> 4 your epidemiologists have to look at trends<br/> 5 related to opioid abuse and addiction?<br/> 6 A. I don't know for sure.<br/> 7 Q. Do they have access to medical<br/> 8 examiner data from Cuyahoga County?<br/> 9 A. They do have access to some of that<br/> 10 information, yes.<br/> 11 Q. And is that -- does that have to be<br/> 12 provided to them by a county employee or can<br/> 13 they directly access that data?<br/> 14 MR. PIFKO: Objection. Foundation.<br/> 15 A. I don't know the vehicle by which<br/> 16 they would receive that. They -- they also<br/> 17 receive information from the Ohio Department of<br/> 18 Health. They seek information. They have<br/> 19 access to -- to databases that I don't know<br/> 20 exactly what they are specifically, but I know<br/> 21 that they are always actively seeking<br/> 22 information to, again, help the department and<br/> 23 provide data that helps us collectively around<br/> 24 this issue and others.<br/> 25 Q. How often do you discuss opioid</p> |

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| <p style="text-align: right;">Page 114</p> <p>1 abuse and addiction trends with your<br/>2 epidemiologists?<br/>3 A. They report directly to the<br/>4 commissioner of health, and those conversations<br/>5 I know take place.<br/>6 Q. Do they ever get escalated up to<br/>7 you?<br/>8 A. Oh, sure.<br/>9 Q. What kind of issues get escalated to<br/>10 you, from epidemiologists to Ms. Sosiak to you?<br/>11 A. They are provided information often<br/>12 from the Ohio Department of Health when there<br/>13 are cases or instances where there have been a<br/>14 spike in OD deaths, when there's new reports<br/>15 that come out, whether that's national or local<br/>16 or state level, and they give that information<br/>17 to her and she and I meet regularly and discuss<br/>18 this issue.<br/>19 Q. How often do you meet with<br/>20 Ms. Sosiak to discuss opioid abuse and addiction<br/>21 issues?<br/>22 A. I can't put an actual number to<br/>23 that.<br/>24 Q. Do you have a standing meeting to do<br/>25 so, weekly, monthly?</p>                                                                                                                                                                                                | <p style="text-align: right;">Page 116</p> <p>1 there was a report of a carfentanil death last<br/>2 night? What kind of reports are you talking<br/>3 about?<br/>4 MR. PIFKO: Objection. Overbroad.<br/>5 Compound.<br/>6 A. Data and information is provided to<br/>7 the health department in a variety of different<br/>8 ways. Some of these can be actual paper<br/>9 documents. Oftentimes it's data that might be<br/>10 pulled from databases and sometimes there are<br/>11 actual reports that are generated from the<br/>12 various divisions within the Ohio Department of<br/>13 Health and to others, what they're tracking.<br/>14 Q. But you, as you sit here today,<br/>15 don't know what databases your epidemiologists<br/>16 have direct access to for opioid-related data?<br/>17 A. I can't say for sure what they are.<br/>18 Q. Do you know any databases that they<br/>19 have access to from which you get reports<br/>20 escalated to you?<br/>21 A. I don't remember the names of them<br/>22 specifically.<br/>23 Q. Have you heard of EpiCenter?<br/>24 A. I have heard of EpiCenter.<br/>25 Q. Is that a database that provides</p> |
| <p style="text-align: right;">Page 115</p> <p>1 A. We talk almost every day. There are<br/>2 always issues that -- that are germane to the<br/>3 department. And I'm also given a lot of<br/>4 information that comes in to me as well, whether<br/>5 that's from public safety. I get a lot of<br/>6 reports. I get incident reports from public<br/>7 safety, sheer volume of OD deaths, fatals and<br/>8 non-fatals as a result of ODs. And as I have<br/>9 this information, I often am talking to her<br/>10 about this as well. We are constantly working<br/>11 on these issues.<br/>12 Q. Now, opioid abuse and addiction<br/>13 aren't the only issues Ms. Sosiak is dealing<br/>14 with as commissioner of the Division of Health?<br/>15 A. That's correct.<br/>16 Q. All right. So when you have<br/>17 conversations with her about public health<br/>18 issues, it's not always about opioids?<br/>19 A. That's true.<br/>20 Q. And when you were talking about, for<br/>21 example, reports that the epidemiologists get<br/>22 from the Department of Health and they might<br/>23 forward to Ms. Sosiak, you said new reports.<br/>24 You're talking about actual physical documents,<br/>25 reports, assessments, those kinds of things, or</p> | <p style="text-align: right;">Page 117</p> <p>1 information regarding opioid abuse and addiction<br/>2 issues?<br/>3 A. I believe that it does.<br/>4 Q. Do you see those reports from<br/>5 EpiCenter?<br/>6 MR. PIFKO: Objection. Vague.<br/>7 A. I don't know if the reports I've<br/>8 seen came directly from EpiCenter.<br/>9 Q. What is EpiCenter? Can you describe<br/>10 it?<br/>11 A. It's a state database of a variety<br/>12 of different data elements that pertain to<br/>13 public health, epidemiology trends, statistics,<br/>14 surveillance data, and that is collected<br/>15 statewide and then it's analyzed also on the<br/>16 state level and provided back to the health<br/>17 departments. I don't know if it has any other<br/>18 public access, but is available for us to be<br/>19 able to see data essentially in real time to be<br/>20 able to do what we need to do to impact our<br/>21 community.<br/>22 Q. Does -- do your epidemiologists use<br/>23 that data to prepare local reports on opioid<br/>24 abuse and addiction?<br/>25 MR. PIFKO: Objection. Foundation.</p>                                                   |

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| <p style="text-align: right;">Page 118</p> <p>1 Calls for speculation.</p> <p>2 A. I believe so. They are using a</p> <p>3 variety of different sources of information.</p> <p>4 Q. Do you ever review those reports</p> <p>5 yourself as director of public health?</p> <p>6 A. I'm given a lot of information on a</p> <p>7 daily basis.</p> <p>8 Q. Well, do you recall reviewing any of</p> <p>9 those EpiCenter reports since you took your</p> <p>10 position in June of 2016?</p> <p>11 A. I cannot say for sure.</p> <p>12 Q. So if I asked you what kind of data</p> <p>13 is reported in those reports, you wouldn't be</p> <p>14 able to answer those questions?</p> <p>15 A. I know that there are a number of</p> <p>16 databases that our staff uses to track and</p> <p>17 analyze information pertaining to public health</p> <p>18 of our community. How that might be put</p> <p>19 together and from which -- which sources is --</p> <p>20 is -- I have to trust that my staff is doing</p> <p>21 what they know best and what we've hired them to</p> <p>22 do and bringing this information to the</p> <p>23 commissioner's attention and to my attention.</p> <p>24 Q. Okay. So you don't supervise those</p> <p>25 epidemiologists directly; is that what you're</p> | <p style="text-align: right;">Page 120</p> <p>1 MR. PIFKO: Objection. Compound.</p> <p>2 A. Sorry. Repeat the question.</p> <p>3 Q. Sure.</p> <p>4 How often do you see these reports?</p> <p>5 MR. PIFKO: Objection. Asked and</p> <p>6 answered.</p> <p>7 A. I see reports that look like this on</p> <p>8 some regular basis.</p> <p>9 Q. Do you ever discuss the data you see</p> <p>10 in this with Ms. Sosiak?</p> <p>11 A. Yes, we have discussed this kind of</p> <p>12 information. Yes.</p> <p>13 Q. Are you familiar with the type of</p> <p>14 data that is being reported in these reports?</p> <p>15 A. Yes.</p> <p>16 Q. Do the data points change over time</p> <p>17 or do the reports always look the same?</p> <p>18 A. What do you mean by data reports?</p> <p>19 Q. Data points.</p> <p>20 A. Excuse me. What do you mean by data</p> <p>21 point?</p> <p>22 Q. Well, do you know what is being</p> <p>23 reported in these reports?</p> <p>24 A. Yes.</p> <p>25 Q. Okay. What is it that's being</p>                                                                                                                                                                                      |
| <p style="text-align: right;">Page 119</p> <p>1 saying?</p> <p>2 A. I do not.</p> <p>3 Q. Ms. Sosiak, is she the one who</p> <p>4 directly supervises epidemiologists?</p> <p>5 A. She is.</p> <p>6 Q. Is she the one who sets their job</p> <p>7 responsibilities on a day-to-day basis?</p> <p>8 A. Yes.</p> <p>9 - - - - -</p> <p>10 (Thereupon, Deposition Exhibit 3,</p> <p>11 CDPH Bi-Weekly Drug Related ER</p> <p>12 Visits Report, was marked for</p> <p>13 purposes of identification.)</p> <p>14 - - - - -</p> <p>15 Q. I'm handing you what's been marked</p> <p>16 as Deposition Exhibit 3. Do you recognize what</p> <p>17 this document is?</p> <p>18 A. Yes, I've seen this report, these</p> <p>19 reports, reports that look like this.</p> <p>20 Q. How often do you see them?</p> <p>21 A. I see them periodically.</p> <p>22 Q. So do you go looking for these</p> <p>23 reports or do you rely on folks to send them up</p> <p>24 to you when there are issues that need to be</p> <p>25 addressed?</p>                                                                                                                                                                                                                                                                | <p style="text-align: right;">Page 121</p> <p>1 reported?</p> <p>2 A. Well, as it says here, these are</p> <p>3 drug-related ER visits, and they are just looked</p> <p>4 at in different ways, whether it's by zip code</p> <p>5 and by gender, by age group, just different ways</p> <p>6 of analyzing data and reporting data.</p> <p>7 Q. And at the top do you recognize that</p> <p>8 logo?</p> <p>9 A. I do recognize the logo.</p> <p>10 Q. All right. What is that?</p> <p>11 A. That is the old Cleveland Department</p> <p>12 of Public Health logo.</p> <p>13 Q. So this report is something that is</p> <p>14 prepared by your department?</p> <p>15 MR. PIFKO: Objection to the extent</p> <p>16 the question mischaracterizes the record and</p> <p>17 assumes facts not in evidence.</p> <p>18 A. I can't say for sure, but if our</p> <p>19 logo was on it, there's a high likelihood that</p> <p>20 this was produced in the health department.</p> <p>21 Q. All right. And it says,</p> <p>22 "Drug-Related ER Visits." Do you know whether</p> <p>23 that's specific to opioids or is that all drugs?</p> <p>24 A. I don't know for sure.</p> <p>25 Q. Okay. So if I wanted to know more</p> |

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1 about this, I would perhaps talk to Ms. Sosiak?

2 A. Yes.

3 Q. Or perhaps one of the

4 epidemiologists who prepares this report?

5 A. Yes.

6 Q. All right. Do you ever escalate

7 these types of reports up to Ms. Walker or Mayor

8 Jackson? I'm sorry if I got her name wrong.

9 Where did we have that? Ms. Walker Minor, do

10 you ever escalate these reports up to her?

11 A. I have used data from reports like

12 this when I've talked to her about issues that

13 are plaguing our city, this being one of them,

14 yes.

15 Q. All right. When is the last time

16 you recall doing that?

17 A. I've done it at least perhaps a

18 couple times this year so far.

19 Q. Okay. When is the last time you did

20 it?

21 A. I can't recall.

22 Q. And how do you transmit those to

23 her?

24 A. It's in one-on-one meetings with

25 her.

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1 Q. So you take a version of this and

2 you hand it to her?

3 A. No, not necessarily.

4 Q. Do you send them by e-mail?

5 A. No. We will just talk about the

6 information.

7 Q. What's the type of information in

8 this report that you would have spoken to

9 Ms. Walker Minor about?

10 MR. PIFKO: Objection to the extent

11 the question mischaracterizes the record.

12 Assumes facts not in evidence.

13 A. I would talk to her about what --

14 what continues to be a huge issue that our city

15 is facing and what is going on in our city

16 related to drugs and addiction that has related

17 to this crisis.

18 Q. Okay. So you're continuing to

19 report to her about the ongoing issues with

20 substance abuse that the city is facing; is that

21 a fair characterization of what you just said?

22 A. You'll have to repeat what you just

23 said.

24 Q. You are discussing with her the

25 ongoing issues that the city is having with

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1 substance abuse; is that a fair

2 characterization?

3 A. We have -- we have a crisis going on

4 and I'm talking to her about the information

5 that is -- is generated, analyzed, looked at

6 from the department, and making sure that she

7 has the information she needs as well because

8 this is -- this is a crisis in our city.

9 Q. Okay. And when you refer to "the

10 crisis," just that we're clear and the record is

11 clear, are you referring to something broader

12 than opioid crisis?

13 A. I believe you mentioned it as an

14 opioid crisis earlier today, so yes, an opioid

15 crisis.

16 Q. Well, Ms. Gordon, I'm just following

17 up on the question you asked. You referred to

18 "the crisis." Is there a meth amphetamine

19 crisis in the City of Cleveland?

20 MR. PIFKO: Objection. Foundation.

21 A. I'm not saying that.

22 Q. I'm simply trying to understand when

23 you used the phrase "the crisis" in your answer,

24 were you referring to the opioid crisis or

25 something broader than that?

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1 A. I'm referring to the crisis that's

2 in our city related to addiction brought upon

3 because of drugs and opioids that have come into

4 the city.

5 Q. Okay. Are the drugs you're

6 referring to opioids or are they stimulants,

7 like cocaine?

8 MR. PIFKO: Objection. Compound.

9 A. We have a lot of information. These

10 are opioids.

11 Q. So when you used the phrase "the

12 crisis" in your answer, you're not limiting your

13 answer to opioids?

14 A. I didn't hear a question.

15 Q. When you referred to the word

16 "crisis" in your answer regarding what

17 information and discussions you have with

18 Ms. Walker Minor, were you referring to all

19 drugs in the City of Cleveland?

20 A. We're talking about the opioid

21 crisis in the City of Cleveland.

22 Q. Okay. Now, when you look at this

23 report, is it limited to just opioids?

24 MR. PIFKO: Objection. Foundation.

25 The data speaks for itself.

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| <p style="text-align: right;">Page 126</p> <p>1 Q. Let me ask you a different question.</p> <p>2 I'll strike that.</p> <p>3 A. Okay.</p> <p>4 Q. When you look at this and when you</p> <p>5 report to Ms. Walker Minor, do you know whether</p> <p>6 it's limited to opioids?</p> <p>7 MR. PIFKO: Objection to the extent</p> <p>8 the question assumes facts not in evidence.</p> <p>9 A. I would look at what's on page 2 and</p> <p>10 the information that's provided and taking this</p> <p>11 all in context.</p> <p>12 Q. Okay. So the answer is what? Is it</p> <p>13 limited to opioids when you review this</p> <p>14 document?</p> <p>15 MR. PIFKO: Objection. Vague.</p> <p>16 A. I can't say that it is or is not.</p> <p>17 Q. Well, you just directed me to look</p> <p>18 at page 2.</p> <p>19 A. Um-hum.</p> <p>20 Q. So why would I look at page 2 for</p> <p>21 any other reason? I'm trying to understand what</p> <p>22 you said, Ms. Gordon. I asked whether this data</p> <p>23 is limited to opioids. Do you recall me asking</p> <p>24 that question? We can start again.</p> <p>25 MR. PIFKO: Objection.</p>                                                  | <p style="text-align: right;">Page 128</p> <p>1 Q. Okay. Ms. Gordon, you are the</p> <p>2 director of Cleveland Public Health, correct?</p> <p>3 A. That is true.</p> <p>4 Q. Persis Sosiak is the commissioner of</p> <p>5 health, correct?</p> <p>6 A. Correct.</p> <p>7 Q. She works for you?</p> <p>8 A. Yes.</p> <p>9 Q. You testified you've had</p> <p>10 conversations with Ms. Sosiak about these</p> <p>11 reports, correct?</p> <p>12 A. Correct.</p> <p>13 Q. You have had conversations with your</p> <p>14 supervisor or the person you report up to,</p> <p>15 Ms. Walker Minor, about this report, correct?</p> <p>16 A. Correct.</p> <p>17 MR. PIFKO: Objection to the extent</p> <p>18 the question mischaracterizes the record.</p> <p>19 Q. Does it or does it not relate to</p> <p>20 drug-related ER visits generally?</p> <p>21 MR. PIFKO: Objection. The document</p> <p>22 speaks for itself. Foundation.</p> <p>23 Q. Let me ask another question.</p> <p>24 When you look at this report, is</p> <p>25 there anything in this report that tells you how</p>                   |
| <p style="text-align: right;">Page 127</p> <p>1 Argumentative. For the record, there's no</p> <p>2 question pending.</p> <p>3 A. Counsel, the title of this report is</p> <p>4 "Biweekly Drug-Related ER Visits."</p> <p>5 Q. Yes. You pointed that out to me</p> <p>6 before, if you'll recall, and I asked is it</p> <p>7 limited to opioids.</p> <p>8 A. I can't say that it is limited to</p> <p>9 opioids, and --</p> <p>10 Q. And then you directed --</p> <p>11 MR. PIFKO: Hold on. She's still</p> <p>12 talking.</p> <p>13 A. Looking at page 2, you have to look</p> <p>14 at what the data sources are to really</p> <p>15 understand what is -- what's being provided in</p> <p>16 the data, and so I look at what the data sources</p> <p>17 are and what this information is actually trying</p> <p>18 to convey.</p> <p>19 Q. That's what I'm asking you. Does it</p> <p>20 convey data regarding strictly opioid ER visits?</p> <p>21 MR. PIFKO: Objection. The document</p> <p>22 speaks for itself.</p> <p>23 A. It is not. It says here that it is</p> <p>24 referencing key words and abbreviations used in</p> <p>25 ER visits. That is what this is reporting.</p> | <p style="text-align: right;">Page 129</p> <p>1 many of these ER visits were related to opioids?</p> <p>2 A. No, it does not.</p> <p>3 Q. Is there anything in this report</p> <p>4 that tells you how many of these ER visits were</p> <p>5 related to prescription opioids?</p> <p>6 MR. PIFKO: Objection. The document</p> <p>7 speaks for itself.</p> <p>8 A. No, it does not.</p> <p>9 Q. Is there anything in here that tells</p> <p>10 you how many of these overdoses were related to</p> <p>11 heroine?</p> <p>12 MR. PIFKO: Same objection.</p> <p>13 A. No, it does not.</p> <p>14 Q. Anything in here that talks about</p> <p>15 how many overdoses with illicit fentanyl?</p> <p>16 MR. PIFKO: Same objection.</p> <p>17 A. No, it does not.</p> <p>18 Q. Does it tell you anything regarding</p> <p>19 how many of those ER visits were alcohol</p> <p>20 related?</p> <p>21 MR. PIFKO: Same objection.</p> <p>22 A. Not specifically.</p> <p>23 Q. Does it appear that alcohol-related</p> <p>24 ER visits would be included within this report?</p> <p>25 MR. PIFKO: Same objection.</p> |

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| <p style="text-align: right;">Page 130</p> <p>1 A. It is included in the report.</p> <p>2 Q. And specifically to answer that</p> <p>3 question, you're looking at the bottom of page 2</p> <p>4 which describes the data points that are</p> <p>5 included in the analysis, correct?</p> <p>6 A. Correct.</p> <p>7 Q. So all of these could be</p> <p>8 alcohol-related ER visits; would you agree?</p> <p>9 MR. PIFKO: Objection. Calls for</p> <p>10 speculation.</p> <p>11 A. It's highly unlikely.</p> <p>12 Q. But they could be?</p> <p>13 MR. PIFKO: Same objection.</p> <p>14 A. It takes into account a whole number</p> <p>15 of -- of elements of ER visits. So it's a</p> <p>16 collection of information. It's not specific to</p> <p>17 any one.</p> <p>18 Q. So, again, it could -- any one of</p> <p>19 these data points for a zip code or a particular</p> <p>20 week, that week could have all been</p> <p>21 alcohol-related incidents?</p> <p>22 MR. PIFKO: Objection. Incomplete</p> <p>23 hypothetical. Calls for speculation.</p> <p>24 Q. We don't know, that's the point,</p> <p>25 right? We don't know from looking at this?</p> | <p style="text-align: right;">Page 132</p> <p>1 have emergency preparedness, nursing clinics,</p> <p>2 STIs, infant mortality.</p> <p>3 Q. And, to be clear, those are not all</p> <p>4 specifically touching the opioid crisis we've</p> <p>5 been talking about?</p> <p>6 A. Pretty much everything within the</p> <p>7 health department does touch this issue in some</p> <p>8 way, shape or form, yes.</p> <p>9 Q. Do flu vaccines touch on the opioid</p> <p>10 crisis?</p> <p>11 A. We train all of our staff to</p> <p>12 recognize issues of addiction, talking to</p> <p>13 patients, and we've needed to prepare people</p> <p>14 because this has -- again, this has been a big</p> <p>15 impact in our city and all of our staff has</p> <p>16 needed to be -- needed to have a level of</p> <p>17 understanding of the issue and how to talk to</p> <p>18 the individuals and families who seek our</p> <p>19 services and make sure that they know how to</p> <p>20 respond therein.</p> <p>21 Q. So give me an example of somebody</p> <p>22 who would be providing a flu vaccine and how</p> <p>23 that would touch on the opioid crisis.</p> <p>24 MR. PIFKO: Objection. Incomplete</p> <p>25 hypothetical.</p>                                                                                                                                                       |
| <p style="text-align: right;">Page 131</p> <p>1 A. It doesn't go to that level of</p> <p>2 specificity.</p> <p>3 Q. Right. We don't know from looking</p> <p>4 at this because this report doesn't tell us how</p> <p>5 many of those are opioid-related versus other,</p> <p>6 right?</p> <p>7 MR. PIFKO: Objection. Document</p> <p>8 speaks for itself.</p> <p>9 A. Correct.</p> <p>10 Q. Within the context of the functions</p> <p>11 performed by the Division of Health in the</p> <p>12 Cleveland Department of Health, you mentioned</p> <p>13 Healthy Cleveland and the programming they do.</p> <p>14 You mentioned epidemiologists. You also</p> <p>15 mentioned HIV.</p> <p>16 A. Yes.</p> <p>17 Q. First of all, are there any other</p> <p>18 functions within the Division of Health that</p> <p>19 relate to opioids, touch on opioids that we</p> <p>20 haven't listed --</p> <p>21 A. Sure.</p> <p>22 Well, most importantly, we have an</p> <p>23 office on mental health and substance abuse. We</p> <p>24 are -- we have a registrar that does vital</p> <p>25 statistics, birth and death certificates. We</p>                        | <p style="text-align: right;">Page 133</p> <p>1 You can answer.</p> <p>2 A. Have an individual present and --</p> <p>3 seeking a flu vaccine, and we have staff who</p> <p>4 talk to them in generalities about what's going</p> <p>5 on in their lives and in their home situation</p> <p>6 and if anything else is impacting their life at</p> <p>7 that time, themselves or their family; and so</p> <p>8 within that conversation they're trained to</p> <p>9 understand if they have additional needs,</p> <p>10 whether it's treatment for addiction for</p> <p>11 themselves again, for their family, or whatever</p> <p>12 their situation is. So yeah, we've had to train</p> <p>13 all of our staff regarding this.</p> <p>14 Q. Okay. Who is in charge of training</p> <p>15 your staff, specifically those who provide flu</p> <p>16 vaccines to members of the public?</p> <p>17 A. That would be the responsibility of</p> <p>18 the Office of Mental Health and Substance Abuse.</p> <p>19 We've also had additional training for the</p> <p>20 staff. There's some things that the</p> <p>21 commissioner has provided as well. They have</p> <p>22 regular staff meetings within each division and</p> <p>23 talk about this issue and have been bringing</p> <p>24 this to the attention of the staff for years.</p> <p>25 Q. Okay. Who was in charge of training</p> |

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1 the folks that give flu vaccines, a name please  
 2 within the department currently?  
 3 A. I'm sorry. Your question, who was  
 4 in charge?  
 5 Q. Who trains the people that actually  
 6 give flu vaccines to members of the public?  
 7 A. Sure. Director of nursing. Her  
 8 name is Jeannie Johnson.  
 9 Q. And the folks that give flu vaccines  
 10 to members of the public, are they employees of  
 11 the Department of Health?  
 12 MR. PIFKO: Objection. Vague.  
 13 Q. Strike that.  
 14 Ms. Gordon, you're the director of  
 15 public health, correct?  
 16 A. That is correct.  
 17 Q. And in that role do you take it upon  
 18 yourself to understand the services provided by  
 19 the Department of Health?  
 20 A. Yes.  
 21 Q. Do you take it upon yourself to know  
 22 what the employees of the Department of Health  
 23 do?  
 24 A. I have over 160 employees and we run  
 25 over 30 programs, and it is a -- I'm constantly

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1 trying to interact with -- with my commissioners  
 2 and with the program managers who oversee all of  
 3 these programs. So yes.  
 4 Q. Okay. And is flu vaccines one of  
 5 the programs that your Department of Health  
 6 provides?  
 7 A. Yes.  
 8 Q. Okay. And we know that the director  
 9 of nursing, Jeannie Johnson, is somebody who  
 10 trains the people who give flu vaccines because  
 11 that's what you told me two minutes ago?  
 12 A. Yes.  
 13 Q. Now, the people who actually  
 14 administer those flu vaccines, are they  
 15 employees?  
 16 A. Yes. Some of them are employees and  
 17 some of them are contractors.  
 18 Q. And the employees you describe, they  
 19 receive training on opioid-related issues is  
 20 what you've told me?  
 21 A. We have had -- I know that they have  
 22 had some training in this area of what to  
 23 observe with patients when they present from  
 24 individuals who are administering influenza  
 25 vaccinations, yes.

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1 Q. Are there written materials provided  
 2 that describe that?  
 3 A. I don't know if there are specific  
 4 written materials. I know that there's -- this  
 5 is discussed at their monthly -- monthly  
 6 meetings -- if they're monthly or quarterly I  
 7 can't recall, but there are -- issues like this  
 8 does -- it comes up.  
 9 Q. Okay. And we're talking about  
 10 training?  
 11 A. Training.  
 12 Q. And the contractors who do flu  
 13 vaccines, are they given the same training?  
 14 A. I believe that they all attend those  
 15 meetings as well, so yes.  
 16 Q. And any initial training that's done  
 17 when a new employee or a new contractor is  
 18 brought on to do flu vaccines, is there written  
 19 materials that are provided that discuss opioids  
 20 and how to deal with that when giving a flu  
 21 vaccine?  
 22 A. I'm not aware of that level of  
 23 specificity.  
 24 Q. And whatever discussions within that  
 25 training that are related to opioids, has that

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1 been going on since before you became the  
 2 director of the Department of Public Health?  
 3 A. Yes.  
 4 Q. That's not some program you  
 5 initiated?  
 6 A. No.  
 7 Q. And when I say "program," I mean the  
 8 training of people who give flu vaccines to be  
 9 aware of opioid-related issues.  
 10 A. They are not independent of the  
 11 other nurses that we -- that we employ to do  
 12 programming within our clinics and in the  
 13 community.  
 14 Q. So the folks that staff these  
 15 clinics who provide flu vaccines might provide a  
 16 range of services?  
 17 A. Correct.  
 18 Q. Is that what you're telling me?  
 19 A. Yes.  
 20 Q. Pregnancy testing, is that something  
 21 the Department of Health does?  
 22 A. We do pregnancy testing, yes.  
 23 Q. HIV testing --  
 24 A. Yes.  
 25 Q. -- we talked about that a little

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| <p style="text-align: right;">Page 138</p> <p>1 bit?</p> <p>2 A. We provide HIV testing.</p> <p>3 Q. Lead screenings?</p> <p>4 A. Correct.</p> <p>5 Q. Immunizations?</p> <p>6 A. Correct.</p> <p>7 Q. TB testing?</p> <p>8 A. We do some TB testing, yes.</p> <p>9 Q. Are there any health services</p> <p>10 provided directly within the clinic to opioid</p> <p>11 abusers?</p> <p>12 A. Yes.</p> <p>13 Q. Any services that relate</p> <p>14 specifically to opioid treatment?</p> <p>15 A. Yes.</p> <p>16 Q. What are those?</p> <p>17 A. In our Office of Mental Health and</p> <p>18 Substance Abuse we do have some treatment</p> <p>19 programs. We do some intensive counseling. A</p> <p>20 program with the drug court called CenterPoint,</p> <p>21 so we provide counseling, intensive counseling</p> <p>22 and treatment there. Distribute the Project</p> <p>23 DAWN kits. We also work in schools or a school</p> <p>24 for a prevention program with youth.</p> <p>25 Q. Anything else?</p>                                                                                                                                                                                                                                                                                                                                                                         | <p style="text-align: right;">Page 140</p> <p>1 Q. Suing drug companies, that's one way</p> <p>2 to get additional resources?</p> <p>3 MR. PIFKO: Objection.</p> <p>4 Argumentative.</p> <p>5 A. The City of Cleveland has chosen</p> <p>6 to -- to file this suit because we're seeking</p> <p>7 damages to help with what has been a huge burden</p> <p>8 on this community in the past, what's going on</p> <p>9 right now, and what we know will be in the</p> <p>10 future with these individuals who are addicted</p> <p>11 to these pills and addicted to drugs. Just the</p> <p>12 types of issues often feels insurmountable as it</p> <p>13 has impacted our community.</p> <p>14 Q. And, Ms. Gordon, do you know what</p> <p>15 the phrase "pill mill" refers to?</p> <p>16 A. I've heard that phrase, yes.</p> <p>17 Q. What does it mean?</p> <p>18 A. I've heard this phrase used as a</p> <p>19 term where there are outlets for individuals</p> <p>20 seeking pain relief or relief -- feed their</p> <p>21 addiction with additional pills to deal with</p> <p>22 their pain or deal with their addiction.</p> <p>23 Q. Do you believe that these pill mills</p> <p>24 contributed to the opioid crisis we're talking</p> <p>25 about today?</p> |
| <p style="text-align: right;">Page 139</p> <p>1 A. We do a lot of health promotion</p> <p>2 where we attend as many community events and</p> <p>3 health fairs in the community and staff tables</p> <p>4 and staff events. We have a mobile clinic where</p> <p>5 we work with -- it's focused on moms -- pregnant</p> <p>6 women and our efforts around infant mortality.</p> <p>7 And they, too -- we have community health</p> <p>8 workers who are trained in identifying, working</p> <p>9 with individuals who have addiction issues and</p> <p>10 working with them and directing them to</p> <p>11 resources. It's -- a fair amount of the work</p> <p>12 that we do is making sure that people are</p> <p>13 matched with -- with available resources if</p> <p>14 there are.</p> <p>15 We are desperate for resources in</p> <p>16 this community for treatment for addressing this</p> <p>17 issue. We recognize that. We are trying to do</p> <p>18 as much as we possibly can with our limited</p> <p>19 staff and the limited resources that are</p> <p>20 available to the -- to our department, and</p> <p>21 always looking for ways that we can increase our</p> <p>22 budget to make sure that we are addressing this</p> <p>23 issue. This is -- this is huge and it's --</p> <p>24 we -- we need the resources to be able to deal</p> <p>25 with this issue.</p> | <p style="text-align: right;">Page 141</p> <p>1 MR. PIFKO: Objection. Foundation.</p> <p>2 A. I don't think I can respond to that.</p> <p>3 Q. Well, I don't know what that means.</p> <p>4 You can respond with yes, no or I don't know.</p> <p>5 So do you think pill mills have contributed at</p> <p>6 all to the opioid crisis we're talking about?</p> <p>7 MR. PIFKO: Objection. Foundation.</p> <p>8 Objection to the extent the question calls for a</p> <p>9 legal conclusion or a legal issue in the case.</p> <p>10 You can answer.</p> <p>11 A. I don't know. Excuse me. I don't</p> <p>12 know.</p> <p>13 Q. All right. Again, you're the</p> <p>14 director of the Department of Public Health in</p> <p>15 the City of Cleveland? Yes?</p> <p>16 A. Yes.</p> <p>17 Q. We just talked about a lot of</p> <p>18 programs that you described within the</p> <p>19 department that touch on opioid abuse and</p> <p>20 addiction issues, services that are provided to</p> <p>21 the community. Do you recall?</p> <p>22 A. I do.</p> <p>23 Q. You talked about suing defendants</p> <p>24 for responsibility for the opioid crisis?</p> <p>25 MR. PIFKO: Objection.</p>                                                                              |

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| <p style="text-align: right;">Page 142</p> <p>1 Mischaracterizes.</p> <p>2 Q. You brought that up, right?</p> <p>3 A. No. You brought that up.</p> <p>4 Q. Fair enough.</p> <p>5 That's something that's being done</p> <p>6 right now by the City of Cleveland, you agree,</p> <p>7 that's why we're here?</p> <p>8 A. That's why we're here, yes.</p> <p>9 Q. You know what pill mills are? You</p> <p>10 described that, right?</p> <p>11 A. To some degree. I know a little bit</p> <p>12 about what these are.</p> <p>13 Q. Well, you're a consumer of news</p> <p>14 about opioid issues, you've read about pill</p> <p>15 mills?</p> <p>16 A. I've read about a lot of things.</p> <p>17 Q. You've read reports at least from</p> <p>18 the Ohio AG's office. You told me that, right?</p> <p>19 A. Yeah.</p> <p>20 Q. Have you read about pill mills in</p> <p>21 any of those reports or in news sources you</p> <p>22 referred to as a consumer of news?</p> <p>23 A. I have.</p> <p>24 Q. And based on anything you've read,</p> <p>25 do you have a belief, personal belief, as to</p>                                          | <p style="text-align: right;">Page 144</p> <p>1 complaint seeking damages for the crisis, the</p> <p>2 opioid crisis we've been discussing?</p> <p>3 MR. PIFKO: Objection. Foundation.</p> <p>4 Calls for a legal conclusion.</p> <p>5 A. I do not know.</p> <p>6 Q. Have you seen the complaint?</p> <p>7 A. I have seen the complaint.</p> <p>8 Q. Have you seen the names of any pill</p> <p>9 mill operators in the complaint?</p> <p>10 MR. PIFKO: Objection. Foundation.</p> <p>11 MR. NAEEM: She just said she saw</p> <p>12 the complaint.</p> <p>13 A. I don't know.</p> <p>14 Q. You don't know if you've seen any</p> <p>15 pill mill operators in the complaint?</p> <p>16 A. No.</p> <p>17 MR. PIFKO: We talked about taking a</p> <p>18 break for lunch after 12:30.</p> <p>19 MR. NAEEM: If you want to take a</p> <p>20 break now, it's fine.</p> <p>21 MR. PIFKO: All right.</p> <p>22 THE VIDEOGRAPHER: Off the record.</p> <p>23 The time is 12:35.</p> <p>24</p> <p>25 (Luncheon recess taken.)</p>                                                                                     |
| <p style="text-align: right;">Page 143</p> <p>1 whether pill mills, for example, have</p> <p>2 contributed to the opioid crisis?</p> <p>3 A. May have contributed to the opioid</p> <p>4 crisis, yes.</p> <p>5 Q. What's the City of Cleveland doing</p> <p>6 to hold them accountable for the opioid crisis?</p> <p>7 MR. PIFKO: Objection to the extent</p> <p>8 the question assumes facts not in evidence,</p> <p>9 foundation, speculation. Objection to the</p> <p>10 extent the question calls for legal conclusions</p> <p>11 or opinions.</p> <p>12 You can answer.</p> <p>13 Oh, and objection to the extent</p> <p>14 you've had conversations with counsel about that</p> <p>15 issue. I'm going to instruct you not to reveal</p> <p>16 any confidential communications you've had with</p> <p>17 counsel about that issue.</p> <p>18 Aside from that, you can answer.</p> <p>19 Q. I don't remember what the question</p> <p>20 is. Do you?</p> <p>21 A. Perhaps you could rephrase the</p> <p>22 question.</p> <p>23 Q. Okay.</p> <p>24 Has the City of Cleveland sued</p> <p>25 operators of pill mills as part of this</p> | <p style="text-align: right;">Page 145</p> <p>1 THE VIDEOGRAPHER: Back on the</p> <p>2 record. The time is 1:32.</p> <p>3 -----</p> <p>4 AFTERNOON SESSION</p> <p>5 CONTINUED EXAMINATION OF MERLE GORDON</p> <p>6 BY MR. NAEEM:</p> <p>7 Q. Ms. Gordon, before we took a break,</p> <p>8 we had been talking about pill mills. I wanted</p> <p>9 to move on and ask, are there substances other</p> <p>10 than prescription opioids that you believe have</p> <p>11 contributed to the opioid crisis in the City of</p> <p>12 Cleveland?</p> <p>13 MR. PIFKO: Objection to the extent</p> <p>14 the question calls for expert opinion, legal</p> <p>15 opinion.</p> <p>16 You can answer.</p> <p>17 A. I'm sorry. You're going to have to</p> <p>18 repeat the question.</p> <p>19 Q. Are there substances other than</p> <p>20 prescription opioids that you believe have</p> <p>21 contributed to the opioid crisis in the City of</p> <p>22 Cleveland?</p> <p>23 MR. PIFKO: Same objections.</p> <p>24 A. I believe that they were the most</p> <p>25 significant contributing factor to the opioid</p> |

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| <p style="text-align: right;">Page 146</p> <p>1 crisis in the City of Cleveland.</p> <p>2 Q. Well, that's not what I asked, but</p> <p>3 can you pull out Exhibit 1-A from the stack of</p> <p>4 exhibits we've marked?</p> <p>5 A. Yes.</p> <p>6 Q. You, again, to refresh, have seen</p> <p>7 this document, correct?</p> <p>8 A. Yes. This is an agenda for the U.S.</p> <p>9 Attorney's Office opioid addiction task force</p> <p>10 that I attend.</p> <p>11 Q. And what is the date that that</p> <p>12 meeting was to be scheduled?</p> <p>13 A. It says on the document Friday,</p> <p>14 October 7, 2016.</p> <p>15 Q. All right. And that's roughly four</p> <p>16 months after you started with the Department of</p> <p>17 Health?</p> <p>18 A. Roughly, yes.</p> <p>19 Q. We've established, I believe, and</p> <p>20 correct me if I'm wrong, but the handwritten</p> <p>21 notes on this document are yours?</p> <p>22 A. They look like mine, yes.</p> <p>23 Q. And this is a document that you</p> <p>24 discovered this weekend and turned over to your</p> <p>25 counsel a couple of days ago?</p>                                                     | <p style="text-align: right;">Page 148</p> <p>1 A. I assume so.</p> <p>2 Q. And, again, this was October 7,</p> <p>3 2016, roughly four months after you started with</p> <p>4 the Department of Health, correct?</p> <p>5 A. Correct, and most likely what was</p> <p>6 said at the meeting just taking notes.</p> <p>7 Q. You can put that aside.</p> <p>8 - - - - -</p> <p>9 (Thereupon, Deposition Exhibit 4,</p> <p>10 Document Entitled "Opiate Response</p> <p>11 Presentation: Merle Gordon,</p> <p>12 Director of Public Health,"</p> <p>13 Beginning Bates Stamp</p> <p>14 CLEVE_000187960, was marked for</p> <p>15 purposes of identification.)</p> <p>16 - - - - -</p> <p>17 Q. I'm going to hand you what we've</p> <p>18 marked as Deposition Exhibit 4. Now, the</p> <p>19 question I had asked originally of you when we</p> <p>20 came back on the record, Ms. Gordon, was, do you</p> <p>21 believe there are substances other than</p> <p>22 prescription opioids that have contributed to</p> <p>23 the opioid crisis. So I'll repeat that</p> <p>24 question. Do you believe there are substances</p> <p>25 other than prescription opioids that have</p> |
| <p style="text-align: right;">Page 147</p> <p>1 A. I believe this was part of the</p> <p>2 documents, yes.</p> <p>3 Q. So your handwritten notes, they are</p> <p>4 notes of discussions that were ongoing during</p> <p>5 the meeting?</p> <p>6 A. I cannot say for sure, but they</p> <p>7 appear to be notes that were taken during that</p> <p>8 meeting.</p> <p>9 Q. Okay. Well, the alternative would</p> <p>10 be they are your analysis, independent analysis,</p> <p>11 correct?</p> <p>12 MR. PIFKO: Objection to the extent</p> <p>13 the question assumes facts not in evidence.</p> <p>14 A. I suppose that's the alternative,</p> <p>15 but -- yeah, it looks to be -- looks to be notes</p> <p>16 taken from that meeting.</p> <p>17 Q. Okay. And on page 1, the first line</p> <p>18 of your handwritten notes, what does it say?</p> <p>19 A. It says, "Fentanyl attracting</p> <p>20 younger people."</p> <p>21 Q. And what does the second line say?</p> <p>22 A. The second line on this document,</p> <p>23 the handwritten note, says, "Prescribing</p> <p>24 practices are no longer the precursor to OD."</p> <p>25 Q. And OD means overdose?</p> | <p style="text-align: right;">Page 149</p> <p>1 contributed to the opioid crisis?</p> <p>2 MR. PIFKO: Objection. Foundation.</p> <p>3 Objection to the extent that question calls for</p> <p>4 a legal opinion, legal conclusion, expert</p> <p>5 opinion.</p> <p>6 A. My answer remains.</p> <p>7 Q. Okay. So Exhibit 4, do you</p> <p>8 recognize this document?</p> <p>9 A. I recognize the document.</p> <p>10 Q. Do you recall the date that this</p> <p>11 document would have been prepared?</p> <p>12 MR. PIFKO: Objection. Foundation.</p> <p>13 A. I do not. Often documents are</p> <p>14 created, my name is put on them as -- whether in</p> <p>15 draft form, final form, that are related to work</p> <p>16 done from the Cleveland Department of Public</p> <p>17 Health.</p> <p>18 Q. But you don't dispute the fact that</p> <p>19 this document was created at some point while</p> <p>20 you were director of the Department of Health,</p> <p>21 do you?</p> <p>22 MR. PIFKO: Objection. Foundation.</p> <p>23 A. I don't dispute that. Apparently</p> <p>24 so.</p> <p>25 Q. And what is the title of the</p>                                             |

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| <p style="text-align: right;">Page 150</p> <p>1 document?</p> <p>2 A. "Opiate Response Presentation."</p> <p>3 Q. And whose name is listed underneath</p> <p>4 that?</p> <p>5 A. My name is underneath that.</p> <p>6 Q. Do you recognize this as potentially</p> <p>7 a document you used to provide presentations to</p> <p>8 the cabinet that we discussed earlier?</p> <p>9 A. I do not. The information I would</p> <p>10 have provided to the cabinet is -- would not</p> <p>11 have looked like this.</p> <p>12 Q. Do you have any specific</p> <p>13 recollection today of why this was prepared?</p> <p>14 MR. PIFKO: Objection. Foundation.</p> <p>15 A. I do not. Again, there are a lot of</p> <p>16 documents that are created and background</p> <p>17 information and other documents such as -- such</p> <p>18 as this that are created by staff in the</p> <p>19 department and others around the city pertaining</p> <p>20 to public health issues, and my name would be</p> <p>21 associated with it just as the director of the</p> <p>22 department.</p> <p>23 Q. Okay. So do you see the sentence in</p> <p>24 the first paragraph that starts with "Today,"</p> <p>25 the second -- third sentence?</p> | <p style="text-align: right;">Page 152</p> <p>1 Q. Under "Opioid Use," the first bullet</p> <p>2 point in Exhibit 4, it says, "No longer just</p> <p>3 heroine used by injection." Do you see that?</p> <p>4 A. I do.</p> <p>5 Q. "Fentanyl and carfentanil are used</p> <p>6 both in mixes and straight." Do you see that?</p> <p>7 A. I do.</p> <p>8 Q. Do you agree with that statement?</p> <p>9 MR. PIFKO: Objection. Foundation.</p> <p>10 A. I do agree with that statement.</p> <p>11 Q. What is fentanyl?</p> <p>12 A. Fentanyl is a synthetic opiate.</p> <p>13 Q. Is it manufactured illicitly?</p> <p>14 MR. PIFKO: Objection. Foundation.</p> <p>15 A. My understanding, that some is and</p> <p>16 some is not.</p> <p>17 Q. And the fentanyl that is not, where</p> <p>18 does that come from?</p> <p>19 MR. PIFKO: Objection. Foundation.</p> <p>20 Calls for speculation.</p> <p>21 A. It's my understanding that that is</p> <p>22 manufactured -- can be manufactured anywhere.</p> <p>23 It's a synthetic product.</p> <p>24 Q. Okay. And I used illicit. You said</p> <p>25 it can be illicit or not illicit.</p> |
| <p style="text-align: right;">Page 151</p> <p>1 A. I do.</p> <p>2 Q. Okay. Can you read that, please,</p> <p>3 into the record?</p> <p>4 A. The document states, "Today, opiate</p> <p>5 abuse exists on multiple levels and heroine is</p> <p>6 far from the only drug of abuse."</p> <p>7 Q. Do you agree with that statement?</p> <p>8 MR. PIFKO: Objection. Foundation.</p> <p>9 A. I do.</p> <p>10 Q. And just to address the foundation</p> <p>11 objection again, Ms. Gordon, you are the</p> <p>12 director of the Department of Public Health for</p> <p>13 the City of Cleveland, correct?</p> <p>14 A. That is correct.</p> <p>15 Q. And within the Department of Health,</p> <p>16 as we've discussed, as part of Cleveland's</p> <p>17 response to the opioid crisis you provide</p> <p>18 treatment services?</p> <p>19 A. We do.</p> <p>20 Q. Education and prevention services?</p> <p>21 A. We do.</p> <p>22 Q. Do you believe you have knowledge</p> <p>23 regarding the opioid crisis and your</p> <p>24 department's response to it?</p> <p>25 A. I do.</p>                                                                                                                                                | <p style="text-align: right;">Page 153</p> <p>1 A. That is my understanding.</p> <p>2 Q. Do you believe legal fentanyl can be</p> <p>3 manufactured by anyone?</p> <p>4 MR. PIFKO: Objection. Foundation.</p> <p>5 Speculation.</p> <p>6 A. You'll have to repeat your original</p> <p>7 question.</p> <p>8 Q. All right. My original question,</p> <p>9 fentanyl and carfentanil are used both in mixes</p> <p>10 and straight. You agreed with that, I think,</p> <p>11 right?</p> <p>12 A. I do. Based on information that is</p> <p>13 provided to me, that is -- that is what I know,</p> <p>14 yes.</p> <p>15 Q. Are you suggesting you don't have</p> <p>16 personal knowledge regarding the issues that are</p> <p>17 in document 4?</p> <p>18 MR. PIFKO: Objection to the extent</p> <p>19 the question calls for a legal conclusion.</p> <p>20 Q. You're suggesting that information</p> <p>21 has been provided to you. Are you just a</p> <p>22 mouthpiece for the Department of Public Health?</p> <p>23 MR. PIFKO: Objection.</p> <p>24 Argumentative.</p> <p>25 A. I'm the director of the Cleveland</p>                |

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| <p style="text-align: right;">Page 154</p> <p>1 Department of Public Health, as you've asked me<br/>2 a few times today.<br/>3 Q. I understand that. Right. So I<br/>4 asked, in this particular presentation with your<br/>5 name on it about fentanyl and carfentanil and<br/>6 whether they're illicitly manufactured.<br/>7 MR. PIFKO: Objection. Foundation.<br/>8 Assumes facts not in evidence.<br/>9 A. It's my understanding that -- you've<br/>10 asked about fentanyl, that it is -- there are<br/>11 some that are and are not illicitly made.<br/>12 Q. Where does the non-illicit fentanyl<br/>13 come from?<br/>14 MR. PIFKO: Objection. Calls for<br/>15 speculation. Foundation.<br/>16 A. I do not know specifics.<br/>17 Q. Where does the illicit fentanyl come<br/>18 from?<br/>19 MR. PIFKO: Objection. Foundation.<br/>20 Calls for speculation.<br/>21 A. So for information that has been<br/>22 provided to me regarding some of the sources,<br/>23 not all sources but some of the sources, that<br/>24 they are made overseas and been told that some<br/>25 of them are made in places like Mexico and</p>                         | <p style="text-align: right;">Page 156</p> <p>1 Q. Do you believe it includes<br/>2 Carfentanil as well?<br/>3 MR. PIFKO: Same objection.<br/>4 A. I'm sorry. You have to just repeat<br/>5 your question.<br/>6 Q. Sure.<br/>7 The second bullet point, the<br/>8 statement about opioids being sold legally<br/>9 overseas and purchased illegally in the U.S.,<br/>10 does that statement refer also to Carfentanil?<br/>11 MR. PIFKO: Objection. Foundation.<br/>12 A. Again, this is not a document that I<br/>13 wrote. It does have my name on it, as many<br/>14 documents have my name on it, the letterhead has<br/>15 my name on it, and people use that all the time.<br/>16 So this is in a different bullet point. I'm<br/>17 not -- I can't draw that conclusion. It says,<br/>18 "Some opiates."<br/>19 Q. But you do believe that that<br/>20 statement does refer to fentanyl?<br/>21 A. It says, "some opiates," and one<br/>22 could draw that conclusion.<br/>23 Q. Well, that was the answer you just<br/>24 gave me before I asked about carfentanil. I<br/>25 want to know about your conclusion. Is fentanyl</p> |
| <p style="text-align: right;">Page 155</p> <p>1 China.<br/>2 Q. And under the second bullet point,<br/>3 "Opiate Trafficking," isn't that, in fact, what<br/>4 it says in your presentation, Exhibit 4?<br/>5 MR. PIFKO: Objection. Assumes<br/>6 facts not in evidence.<br/>7 A. I am not saying that this is my<br/>8 presentation. My name is on this document, as<br/>9 my name is on many documents that are prepared<br/>10 sometimes for me and sometimes with my name on<br/>11 it as the Department of Health and throughout<br/>12 the city.<br/>13 Q. Okay. So in the document titled<br/>14 "Opiate Response Presentation: Merle Gordon,<br/>15 Director of Public Health," does it say in the<br/>16 second bullet point underneath Opiate<br/>17 Trafficking, "Some opiates are sold legally<br/>18 overseas (China) and are purchased online and<br/>19 shipped to the U.S. (illegally)"?<br/>20 A. It says that in this document, yes.<br/>21 Q. And do you believe that this --<br/>22 these opiates that are being discussed include<br/>23 fentanyl, as we've been talking about?<br/>24 MR. PIFKO: Objection. Foundation.<br/>25 A. Yes.</p> | <p style="text-align: right;">Page 157</p> <p>1 an opiate that is sold legally overseas and<br/>2 shipped illegally to the United States?<br/>3 MR. PIFKO: Objection. Foundation.<br/>4 Calls for speculation.<br/>5 A. I cannot confirm if it's sold<br/>6 legally, if those are the -- if that is, in<br/>7 fact, what happens in China. My understanding<br/>8 is that it is shipped and purchased illegally<br/>9 here in the U.S., some -- some opiates are.<br/>10 Q. Well, I'm not talking about opiates<br/>11 generally; just fentanyl. That was my question.<br/>12 Is fentanyl shipped into the U.S. illegally?<br/>13 A. It's my understanding that some of<br/>14 it is, yes.<br/>15 Q. Now, Carfentanil, do you know<br/>16 whether there is any legal manufacturer of<br/>17 Carfentanil in the United States?<br/>18 A. I do not know.<br/>19 - - - - -<br/>20 (Thereupon, Deposition Exhibit 5,<br/>21 Cleveland City Council Committee<br/>22 Calendar dated December 1, 2016,<br/>23 with Attachments Beginning Bates<br/>24 Stamp CLEVE_000189292, was marked<br/>25 for purposes of identification.)</p>             |

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| <p style="text-align: right;">Page 158</p> <p>1       - - - - -</p> <p>2       Q.   Handing you, Ms. Gordon, what's been</p> <p>3 marked as Deposition Exhibit 5, have you seen</p> <p>4 this document before?</p> <p>5       A.   I am familiar with this document.</p> <p>6       Q.   Okay. And what does it refer to?</p> <p>7       A.   It is an -- the first page is the</p> <p>8 committee calendar for Cleveland City Council.</p> <p>9 There's a joint committee with the health and</p> <p>10 human services committee and safety committee</p> <p>11 specifically to talk about this epidemic that's</p> <p>12 killing people in the City of Cleveland.</p> <p>13       Q.   Okay. Did you speak at that</p> <p>14 committee meeting?</p> <p>15       A.   I did.</p> <p>16       Q.   Do you recall speaking at that</p> <p>17 committee meeting?</p> <p>18       A.   I have recollection of speaking at</p> <p>19 that meeting, yes.</p> <p>20       Q.   So you had just stated that this was</p> <p>21 about the opiates that are killing people in the</p> <p>22 City of Cleveland?</p> <p>23       A.   Yes.</p> <p>24       Q.   What opiates were discussed during</p> <p>25 the meeting?</p>                                                          | <p style="text-align: right;">Page 160</p> <p>1 this isn't crack." Did I read that correctly?</p> <p>2       A.   That's what is written in this</p> <p>3 document, yes.</p> <p>4       Q.   Now, can legal -- well, first of</p> <p>5 all, heroine is not a legal substance in the</p> <p>6 United States, is it?</p> <p>7       A.   It's not.</p> <p>8       Q.   Do you know whether Carfentanil is?</p> <p>9       MR. PIFKO: Objection. Foundation.</p> <p>10 Calls for speculation.</p> <p>11       MR. NAEEM: Which is why I asked her</p> <p>12 if she knew.</p> <p>13       Q.   Do you know if Carfentanil is legal</p> <p>14 in the United States?</p> <p>15       A.   For its intended purpose, I believe</p> <p>16 that it is.</p> <p>17       Q.   Fentanyl we talked about, can be</p> <p>18 illicit or legal?</p> <p>19       A.   Correct, for its intended purpose.</p> <p>20       Q.   Now, is it legal to order heroine,</p> <p>21 fentanyl or carfentanil over the internet?</p> <p>22       MR. PIFKO: Objection. Calls for</p> <p>23 speculation. Foundation. Calls for a legal</p> <p>24 conclusion. Incomplete hypothetical.</p> <p>25       A.   If it's not used for its intended</p>                                                                                                                 |
| <p style="text-align: right;">Page 159</p> <p>1       A.   I'm not sure I recall that level of</p> <p>2 specificity, but we did talk about this issue</p> <p>3 broadly. As you have behind page 1, these</p> <p>4 appear to be my -- my notes and information that</p> <p>5 was put together for me and some information</p> <p>6 that talked about jointly with my staff in order</p> <p>7 for me to be prepared to present at this council</p> <p>8 meeting.</p> <p>9       Q.   And there are some opiates</p> <p>10 specifically listed there in those materials,</p> <p>11 correct?</p> <p>12       A.   There are.</p> <p>13       Q.   Okay. And the three that are</p> <p>14 mentioned there are heroine, fentanyl and</p> <p>15 carfentanil, correct?</p> <p>16       MR. PIFKO: Objection to the extent</p> <p>17 the document -- the question mischaracterizes</p> <p>18 the document.</p> <p>19       A.   Those are listed on page 2 of this</p> <p>20 document.</p> <p>21       Q.   And, again, right above the notation</p> <p>22 about heroine, fentanyl and carfentanil, it</p> <p>23 says, "These drugs are synthetic, so they can be</p> <p>24 manufactured anywhere and order them over the</p> <p>25 internet and have them shipped to your door;</p> | <p style="text-align: right;">Page 161</p> <p>1 purpose, I do -- I'm not -- don't know if it</p> <p>2 is -- I don't believe that it is legal to order</p> <p>3 it over the internet if it's not for its legal</p> <p>4 and intended purpose.</p> <p>5       Q.   Is it legal to order heroine,</p> <p>6 fentanyl or carfentanil and have it shipped to</p> <p>7 your door in the United States?</p> <p>8       MR. PIFKO: Objection. Foundation.</p> <p>9 Calls for a legal conclusion. Speculation.</p> <p>10 Incomplete hypothetical.</p> <p>11       A.   If it's not for its intended purpose</p> <p>12 and it's an illegal substance -- having an</p> <p>13 illegal substance sent to your door, dropped off</p> <p>14 at your door, found somewhere else, purchased</p> <p>15 somewhere else, if it's an illegal method --</p> <p>16 it's an illegal substance and illegal to</p> <p>17 purchase it, if it's not for its intended</p> <p>18 purpose, having it mailed to your door is not</p> <p>19 either.</p> <p>20       Q.   What is heroine's intended purpose?</p> <p>21       MR. PIFKO: Objection. Foundation.</p> <p>22 Expert opinion.</p> <p>23       A.   We're talking about people who have</p> <p>24 become addicted to painkillers and opiates, and</p> <p>25 how they became addicted to painkillers and</p> |

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1 opiates and why they have turned to other  
 2 illicit and illegal substances and gotten to  
 3 this point where they would risk their life to  
 4 take substances such as fentanyl, or even  
 5 carfentanil, which is a hundred times as potent  
 6 as fentanyl, is what's so significant about this  
 7 issue and what -- why people are dying and  
 8 really why we are here.  
 9 Q. So you do know a little bit about  
 10 Carfentanil?  
 11 A. I do know a little bit about  
 12 Carfentanil.  
 13 Q. And so, again, my question, because  
 14 I appreciate what you said and we're going to  
 15 get to that in a little bit, but my question is,  
 16 what's the intended purpose of heroine?  
 17 MR. PIFKO: Objection.  
 18 Q. You talked about in your answer  
 19 intended purposes of these medications. What's  
 20 the intended purpose of heroine?  
 21 MR. PIFKO: Objection. Foundation.  
 22 Calls for expert opinion.  
 23 A. It is where people have been driven  
 24 to because they become addicted to pain  
 25 medications and opiates and are seeking other

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1 ways of getting to that high and fixing on their  
 2 addictions, and so they have turned to some of  
 3 these substances to try to feed their fixation  
 4 and their addictions.  
 5 Q. What is your basis for that  
 6 statement?  
 7 A. You know, I attend a lot of  
 8 meetings. I go to a lot of meetings and  
 9 gatherings of people who are experts in this and  
 10 listening to their testimony. Just prior you  
 11 asked me to look at an agenda for a U.S.  
 12 Attorney's meeting. I go to those regularly  
 13 where we have report-outs and are hearing about  
 14 this from people who work in this directly.  
 15 There's -- the CDC has put a lot of information  
 16 out there, a lot of reputable organizations  
 17 on -- from -- the White House had an opiate task  
 18 force. The Ohio Attorney General put out a  
 19 report. So I'm hearing this information from  
 20 all over. I have invested a huge amount of my  
 21 time trying to gather this information,  
 22 understand this issue as it pertains to people  
 23 who are in this community, who are dying and are  
 24 trying to live with this addiction that has just  
 25 taken over their lives, their family's lives,

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1 and the impact that this has had in the  
 2 community.  
 3 Q. So let's talk specifically about  
 4 heroine abusers now, okay.  
 5 Is it your testimony today that all  
 6 heroine abusers in the City of Cleveland use  
 7 heroine because they became addicted to  
 8 prescription opioids?  
 9 MR. PIFKO: Objection. Foundation.  
 10 Calls for expert opinion.  
 11 A. I don't know that I can isolate it  
 12 in as narrow of a way as you've just put it.  
 13 There are pathways to these addictive  
 14 substances, like heroine and fentanyl, and the  
 15 pathways are people started in a way of just  
 16 needing some pain relief and got to a point  
 17 where they could no longer access these  
 18 painkillers through -- whether it was their  
 19 provider or through a pharmacy, and they -- they  
 20 resorted to other means of trying to, again,  
 21 address their fix, address their addiction.  
 22 Q. Okay. How many heroine abusers are  
 23 there in the City of Cleveland currently?  
 24 A. I don't have that direct number.  
 25 Q. Is there anybody that you would go

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1 to within the City of Cleveland to find that  
 2 information?  
 3 A. We are always trying to track  
 4 information, trying to look at all of the data  
 5 that we have available to us about -- whether  
 6 that's non-fatals, these are individuals who are  
 7 seeking treatment. Always trying to get a sense  
 8 of proportion of this epidemic in the city.  
 9 Q. My question was simply, if you  
 10 wanted to find out the number of heroine abusers  
 11 in the City of Cleveland, who would you go to  
 12 ask for that in the City of Cleveland?  
 13 A. I don't believe we have one single  
 14 person who has that specific piece of  
 15 information. We're trying to patch all of this  
 16 information together from, again, non-fatals.  
 17 We have data -- I don't have it right here at my  
 18 fingertips -- of all the people who have died,  
 19 and toxicology reports, that have these drugs in  
 20 their system at time of death. We have a lot of  
 21 people who work in this area, and, again, we try  
 22 to track this through our epidemiologists, our  
 23 Office of Mental Health and Substance Abuse,  
 24 people who provide information at the U.S.  
 25 Attorney's Office, the Opiate Task Force,

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| <p style="text-align: right;">Page 166</p> <p>1 Cuyahoga County Task Force, with information, as<br/> 2 much as they can; within a broader context,<br/> 3 sometimes from the Ohio Department of Health,<br/> 4 what kind of data is provided to us from the<br/> 5 CDC, and, you know, just a variety of sources<br/> 6 because we are all trying to address this issue<br/> 7 from as many different perspectives as possible.<br/> 8 Q. All right. So -- again, back to my<br/> 9 question -- if you needed to find out the number<br/> 10 of heroine abusers in the City of Cleveland, who<br/> 11 would you go to to find out?<br/> 12 MR. PIFKO: Objection. Asked and<br/> 13 answered.<br/> 14 Q. Did you give me any names in that<br/> 15 long answer you gave me?<br/> 16 A. I don't have one specific name.<br/> 17 Q. Okay. Do you believe there is<br/> 18 anyone in the City of Cleveland that could tell<br/> 19 us today in this room how many people abuse<br/> 20 heroine in the City of Cleveland?<br/> 21 MR. PIFKO: Objection. Foundation.<br/> 22 A. On any single day, I don't believe<br/> 23 we have somebody who has just specifically that<br/> 24 information.<br/> 25 Q. Okay. And who would be the person</p>             | <p style="text-align: right;">Page 168</p> <p>1 trying to all collect and analyze and look at<br/> 2 trends and look at, you know, fatals and<br/> 3 non-fatals that come from the police department<br/> 4 and the medical examiner's office. This is a<br/> 5 lot of data. This is what public health is. We<br/> 6 collect a lot of data from a lot of different<br/> 7 sources and really try to put -- wrap our arms<br/> 8 around the issue as quickly and as best as we<br/> 9 can to figure out where we're targeting<br/> 10 resources to help people and help communities in<br/> 11 need. And this addiction issue has just -- it's<br/> 12 taken over. There's a huge amount of impact in<br/> 13 this community as a result of it.<br/> 14 Q. So let me start with, do you have<br/> 15 personal knowledge regarding the number of<br/> 16 heroine abusers who originally were prescribed<br/> 17 prescription opioids and became addicted to<br/> 18 those opioids before using heroine?<br/> 19 A. I believe some of that information<br/> 20 has been tracked for years.<br/> 21 Q. Do you have that information?<br/> 22 A. I'm sure some of that information<br/> 23 has been provided to me in my capacity. The<br/> 24 commissioner has aggregated this information.<br/> 25 We're all trying to collect information, again,</p> |
| <p style="text-align: right;">Page 167</p> <p>1 who would have knowledge regarding whether<br/> 2 people start using heroine because they became<br/> 3 addicted to prescription opioids? And I need<br/> 4 the number of people --<br/> 5 A. I don't have the number of people<br/> 6 for you.<br/> 7 Q. Well, what percentage of heroine<br/> 8 abusers became addicted to prescription opioids<br/> 9 before they --<br/> 10 A. Well, a lot of that is provided from<br/> 11 the CDC. And, again, this is data that is<br/> 12 available -- I don't have that specifically<br/> 13 right here in front of me.<br/> 14 Q. Have you seen data regarding the<br/> 15 number of people who were legitimately<br/> 16 prescribed prescription opioids, became<br/> 17 addicted, and then began using heroine?<br/> 18 A. I believe that some of that<br/> 19 information has been aggregated and put into a<br/> 20 variety of reports that have been produced at a<br/> 21 state level, nationally from the Centers for<br/> 22 Disease Control and Prevention, the CDC, and<br/> 23 some of this is reported out at these drug task<br/> 24 forces that I -- meetings that I've attended at<br/> 25 the U.S. Attorney's Office, and data that we're</p> | <p style="text-align: right;">Page 169</p> <p>1 to try to figure out how best to address this<br/> 2 issue.<br/> 3 Q. So it's your belief that if that --<br/> 4 you have that data and it would have been<br/> 5 produced during this litigation?<br/> 6 MR. PIFKO: Objection.<br/> 7 Mischaracterizes testimony.<br/> 8 A. I'm given a lot of information as<br/> 9 the director of the health department.<br/> 10 Q. But to come to your deposition today<br/> 11 to discuss the opioid crisis, that's not<br/> 12 something you reviewed then, the number of<br/> 13 heroine abusers who originally became addicted<br/> 14 to prescription opioids?<br/> 15 A. I don't have that information<br/> 16 directly in front of me at this moment.<br/> 17 Q. And you can't tell me anybody who<br/> 18 would be able to generate that information from<br/> 19 the Department of Health?<br/> 20 MR. PIFKO: Objection. Asked and<br/> 21 answered.<br/> 22 A. I don't have that information in<br/> 23 front of me.<br/> 24 Q. You don't have the information about<br/> 25 who could provide that in front of you?</p>                                                                                                                                                                                                                              |

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| <p style="text-align: right;">Page 170</p> <p>1 A. The health department, it's a part<br/>2 of all of the data that we gather and the<br/>3 information that we gather on a daily basis, so<br/>4 epidemiologists look at this, again, our Office<br/>5 of Mental Health and Substance Abuse.<br/>6 Q. Okay. So which one of your<br/>7 epidemiologists would be able to tell us how<br/>8 many of the heroine users in the City of<br/>9 Cleveland originally became addicted to<br/>10 legitimately prescribed opioids?<br/>11 MR. PIFKO: Objection.<br/>12 Mischaracterizes the record.<br/>13 A. It's not entirely a fair question<br/>14 that you're asking. Often we're finding out<br/>15 that someone was a heroine addict anecdotally,<br/>16 after they've died, who was -- people aren't<br/>17 necessarily self selecting that they're a<br/>18 heroine addict and reporting that out, people<br/>19 who are in just search of a high because they're<br/>20 addicted and they're trying to find it in some<br/>21 way, shape or form, and whether it's heroine,<br/>22 whether it's fentanyl, whether it's any other<br/>23 substance that they're trying to find just to<br/>24 address their addiction.<br/>25 Q. Let's talk about death reports then</p> | <p style="text-align: right;">Page 172</p> <p>1 A. Tom Gilson is the medical examiner,<br/>2 Dr. Thomas Gilson.<br/>3 Q. Who are the analysts who regularly<br/>4 attend these meetings?<br/>5 A. Hugh Shannon is the one who attends<br/>6 with most frequency, and I've met with him.<br/>7 Q. Have you ever discussed with Hugh<br/>8 Shannon how many heroine overdose victims<br/>9 became -- originally became addicted to<br/>10 prescription opioids?<br/>11 A. I'm sorry. Restate your question.<br/>12 Q. Sure.<br/>13 Have you ever discussed with Hugh<br/>14 Shannon the number of heroine overdose deaths<br/>15 that his office gets that those patients were<br/>16 originally addicted to prescription opioids?<br/>17 A. I can't say that we've talked about<br/>18 a specific number as it relates to that pathway,<br/>19 no.<br/>20 Q. Do you believe every heroine death<br/>21 resulted from a patient who was originally<br/>22 addicted to prescription opioids?<br/>23 MR. PIFKO: Objection. Foundation.<br/>24 Calls for an expert opinion.<br/>25 A. I cannot say that, that people go</p>                                                                                            |
| <p style="text-align: right;">Page 171</p> <p>1 of people who die of heroine.<br/>2 How do you determine from those<br/>3 death reports whether they were ever in their<br/>4 lifetime prescribed prescription opioids? Do<br/>5 you have that data?<br/>6 MR. PIFKO: Objection.<br/>7 Mischaracterizes the record. Assumes facts not<br/>8 in evidence.<br/>9 A. I do not have that data in front of<br/>10 me.<br/>11 Q. Does anyone at the Department of<br/>12 Public Health have that data?<br/>13 A. I don't know.<br/>14 Q. Does anybody at the County Medical<br/>15 Examiner's office have that information?<br/>16 A. I do not know.<br/>17 Q. If you wanted to ask somebody at the<br/>18 County Medical Examiner's office if they do, who<br/>19 would you ask?<br/>20 A. I would ask the medical examiner or<br/>21 one of their analysts that would attend<br/>22 regularly a lot of these meetings that we talk<br/>23 with quite frequently.<br/>24 Q. What's the name of the medical<br/>25 examiner?</p>                                                                                                                                                                                                                                               | <p style="text-align: right;">Page 173</p> <p>1 directly to heroine without any other pathway to<br/>2 a drug that has that kind of an impact on<br/>3 people. I just know from, again, a lot of the<br/>4 information that's presented to me at meetings<br/>5 that I attend with experts and from information<br/>6 that's given to me, that this -- these pathways<br/>7 to heroine, to fentanyl, to these drug<br/>8 cocktails, to these mixes, by and large, for the<br/>9 most part start with prescription drugs and<br/>10 prescription pain killers.<br/>11 Q. What does by and large mean? Is<br/>12 that a percentage?<br/>13 MR. PIFKO: Objection.<br/>14 Mischaracterizes the record.<br/>15 A. It's a term.<br/>16 Q. Is it greater than 50 percent?<br/>17 A. It's a term I just used.<br/>18 Q. Well, is it a majority?<br/>19 A. I don't have all that information in<br/>20 front of me, but there have been a fair amount<br/>21 of studying of this and just starting to<br/>22 correlate the number, the significant increase<br/>23 in -- prescriptions of painkillers from the<br/>24 1990s to sort of current day essentially has<br/>25 gone up threefold, if not more, and as we're</p> |

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| <p style="text-align: right;">Page 174</p> <p>1 starting to see and track all of these overdoses<br/> 2 and overdose deaths as a result of cocktails and<br/> 3 toxicology reports, excuse me, and seeing that<br/> 4 so many of these are related to these -- the<br/> 5 presence of these drugs in these people's blood,<br/> 6 of course we're making these correlations. This<br/> 7 is huge. People are dying. People are dying<br/> 8 every day. I'm getting these reports, another<br/> 9 OD death, another OD death, heroine, heroine,<br/> 10 fentanyl. And this started somewhere and that's<br/> 11 what this is -- that's what's been such a huge<br/> 12 issue and why we're so desperate for resources<br/> 13 to help people and help our communities.<br/> 14 Q. So you've spoken with experts who<br/> 15 make the correlation between legitimate<br/> 16 prescription opioid use and heroine deaths?<br/> 17 A. Yes. Many people have talked about<br/> 18 this pathway to these illegal and illicit drugs<br/> 19 as a result of individuals no longer being able<br/> 20 to access prescription drugs for whatever reason<br/> 21 and are going to these other drugs. This is<br/> 22 written about extensively. I'm sure you've read<br/> 23 a lot of these reports. These come out from<br/> 24 reputable firms written about in publications,<br/> 25 local publications, Plain Dealer and so on,</p> | <p style="text-align: right;">Page 176</p> <p>1 specifically about these pathways and how<br/> 2 critical this was because we just were dealing<br/> 3 with proliferation and this crisis here in this<br/> 4 city.<br/> 5 Q. Can you pull out Exhibit 1-A again?<br/> 6 A. Yes.<br/> 7 Q. Can you read into the record again<br/> 8 the second sentence in your handwriting on that<br/> 9 document?<br/> 10 A. The sentence says, "Prescribing<br/> 11 practices are no longer the precursor to OD,"<br/> 12 which must have been something that was said at<br/> 13 this meeting almost two years ago that I wrote<br/> 14 down.<br/> 15 Q. And was your meeting with the<br/> 16 Surgeon General around the same time?<br/> 17 A. Meeting with the Surgeon General was<br/> 18 earlier than -- than this meeting.<br/> 19 Q. But you had only been at the<br/> 20 Department of Public Health for four months, so<br/> 21 it was within that four-month period?<br/> 22 A. Well, you have to understand that<br/> 23 when you go to a lot of meetings, it's always<br/> 24 important to write down what people are saying<br/> 25 in the meetings to kind of understand where</p> |
| <p style="text-align: right;">Page 175</p> <p>1 newspapers across the country, and, again, CDC<br/> 2 reports, the Ohio Department of Health. The<br/> 3 U.S. Attorney's Office has -- I can't say that<br/> 4 they put -- the U.S. -- the Ohio Attorney<br/> 5 General's Office has put out reports.<br/> 6 There's -- a lot of people are looking at this<br/> 7 because this has really had such a huge impact<br/> 8 here in Ohio. Ohio has always been one of the<br/> 9 sort of top five or ten states in the nation<br/> 10 that have been hardest hit by this issue.<br/> 11 Q. All right. So who are the names of<br/> 12 some of those experts, then, that have<br/> 13 specifically told you the information regarding<br/> 14 heroine deaths and legitimate prescription<br/> 15 opioids?<br/> 16 MR. PIFKO: Objection to the extent<br/> 17 the question assumes facts not in evidence.<br/> 18 You can answer.<br/> 19 A. I'm not recalling every person's<br/> 20 name, but again, I've been in so many meetings<br/> 21 related to this. When I first joined, one of<br/> 22 the first meetings related to this that I went<br/> 23 to was with the U.S. Surgeon General's Office.<br/> 24 It was at the Cleveland Clinic. And there were<br/> 25 a number of experts in that room who talked</p>                                                                                                            | <p style="text-align: right;">Page 177</p> <p>1 anybody and everybody is coming from, so this<br/> 2 obviously was something that was said in -- I<br/> 3 can't say it was obviously, but something that<br/> 4 must have been said in this meeting that I wrote<br/> 5 down on the agenda for the U.S. Attorney's<br/> 6 Office Opiate Task Force meeting.<br/> 7 Q. So let me be clear about what the<br/> 8 question was. The meeting with the Surgeon<br/> 9 General was between June of 2016 and October 7th<br/> 10 of 2016?<br/> 11 A. I believe so.<br/> 12 Q. Okay. Does your department track<br/> 13 any data regarding whether or not -- strike<br/> 14 that.<br/> 15 Do you have any data that -- at the<br/> 16 Cleveland Department of Health that indicates<br/> 17 how many people in the City of Cleveland have<br/> 18 abused prescription opioids since 2010?<br/> 19 A. Do we track that information?<br/> 20 Q. Do you have it?<br/> 21 A. I cannot say for sure if I have it.<br/> 22 Q. And then the follow-up question, is<br/> 23 that something that your department tracks?<br/> 24 A. I do not believe that we track that<br/> 25 specifically.</p>      |

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| <p style="text-align: right;">Page 178</p> <p>1 Q. So your department wouldn't track<br/>2 the number of prescription drug abusers who<br/>3 purchase those drugs illegally?<br/>4 A. We're a department strapped for<br/>5 resources. If we have them, I know for sure<br/>6 that we would make sure that we had people who<br/>7 would be tracking all of this information.<br/>8 THE WITNESS: I'd like to take a<br/>9 break, please.<br/>10 MR. PIFKO: Okay.<br/>11 THE VIDEOGRAPHER: Going off the<br/>12 record. The time is 2:16.<br/>13 (Recess had.)<br/>14 THE VIDEOGRAPHER: Back on the<br/>15 record, 2:32.<br/>16 BY MR. NAEEM:<br/>17 Q. Ms. Gordon, I'm going to skip around<br/>18 a bit here to try to clean up some of the things<br/>19 we've talked about or some of the specific items<br/>20 within the Department of Health you listed that<br/>21 I didn't yet follow up on.<br/>22 So earlier in the deposition we were<br/>23 talking about how the Department of Health funds<br/>24 its services, for lack of a better word. You<br/>25 mentioned and we talked about revenue from the</p> | <p style="text-align: right;">Page 180</p> <p>1 department, how much funding has been received<br/>2 from grants?<br/>3 A. A little more than 9 million dollars<br/>4 that -- that are received from grants.<br/>5 Q. And that's 2018 budget year?<br/>6 A. Yes.<br/>7 Q. How much of that is attributed to<br/>8 programs related to opioid prevention,<br/>9 treatment, education, opioid-related programs<br/>10 from your department?<br/>11 A. For the Office of Mental Health and<br/>12 Substance Abuse, there is a rather large SAMHSA,<br/>13 a grant from SAMHSA, which is a federal grant.<br/>14 We also are funded in part from the local ADAMHS<br/>15 board, the alcohol and drug board. And I<br/>16 believe those are most of them.<br/>17 Q. Are you able to tell me how much the<br/>18 amount of those grants are within your<br/>19 department's budget combined?<br/>20 A. One is multi-year, so I believe that<br/>21 it is probably about \$800,000, 700 to \$800,000<br/>22 from the federal program. The other is about --<br/>23 less -- let's see. One is about \$90,000, and<br/>24 the other I cannot remember.<br/>25 Q. Okay. So within the, roughly, 9</p>                                                       |
| <p style="text-align: right;">Page 179</p> <p>1 City of Cleveland. You also mentioned grants.<br/>2 And then the third one you mentioned was fees<br/>3 and permits.<br/>4 A. Fees generated from permits and<br/>5 licenses, yes.<br/>6 Q. Okay. Is there any other source of<br/>7 revenue that your department uses to fund its<br/>8 operations?<br/>9 A. There -- we do bill for some of our<br/>10 services, so we would bill insurance for some of<br/>11 our services, medical services.<br/>12 Q. Now, as far as grants, how does that<br/>13 process work? What are the targets for the<br/>14 Cleveland Department of Health in terms of<br/>15 seeking grants?<br/>16 MR. PIFKO: Objection. Overbroad.<br/>17 A. What are -- I'm sorry. You have to<br/>18 repeat the question.<br/>19 Q. Targets. Who do you look for grants<br/>20 from?<br/>21 A. We look for any kind of revenue<br/>22 possible to -- to fund our programs, so some of<br/>23 them have been from the state, from federal<br/>24 government, from private philanthropy.<br/>25 Q. And in the 2018 budget for your</p>                 | <p style="text-align: right;">Page 181</p> <p>1 million dollars received in grants for the 2018<br/>2 budget year, you've given me roughly \$900,000 of<br/>3 that that goes toward opioid-related services?<br/>4 A. Directly. Again, indirectly our<br/>5 staff is -- I invest in our staff to make sure<br/>6 that they are aware of this issue and are<br/>7 trained to recognize this in the work that they<br/>8 do in the community and our clinics, et cetera,<br/>9 so those are what we would consider indirect<br/>10 funding to the rest of the staff related to this<br/>11 issue.<br/>12 Q. Do those come out of the grants?<br/>13 A. It's across the board. It would be<br/>14 funded from any of the funding sources that were<br/>15 just mentioned.<br/>16 Q. Okay. So if you -- can you today<br/>17 for us allocate how much of the budget of your<br/>18 department spent on employee salaries and<br/>19 benefits goes towards opioid-related issues?<br/>20 Are you able to do that today?<br/>21 A. I know that I couldn't do that<br/>22 calculation. Some of these are, again, indirect<br/>23 dollars supporting staff and some of the direct<br/>24 programs and programs that we serve in the<br/>25 community.</p> |

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| <p style="text-align: right;">Page 182</p> <p>1 Q. So you're not able to do it today?</p> <p>2 A. I don't know if I can give you an</p> <p>3 exact figure, no.</p> <p>4 Q. Can you give me an estimate?</p> <p>5 A. Well, arguably, almost all of it</p> <p>6 does in one way, shape or form or another,</p> <p>7 because this issue has impacted our community so</p> <p>8 broadly that we are all dealing with it in one</p> <p>9 way or another.</p> <p>10 Q. So if I understand that, are you</p> <p>11 suggesting that a hundred percent of the budget</p> <p>12 for your department goes towards opioid-related</p> <p>13 issues?</p> <p>14 MR. PIFKO: Objection.</p> <p>15 Mischaracterizes testimony.</p> <p>16 A. That's not -- that's not what I</p> <p>17 said.</p> <p>18 Q. Okay. Does your department prepare</p> <p>19 budget documents?</p> <p>20 A. We prepare for the annual budget</p> <p>21 process, yes.</p> <p>22 Q. Where are those documents stored?</p> <p>23 A. Those documents are in my department</p> <p>24 and the Department of Finance. That's how the</p> <p>25 process goes between the departments.</p> | <p style="text-align: right;">Page 184</p> <p>1 A. The general revenue of the City of</p> <p>2 Cleveland, yes.</p> <p>3 Q. All right. And as far as billing</p> <p>4 for services, are there means tests for the</p> <p>5 services that your department provides to</p> <p>6 Cleveland citizens?</p> <p>7 MR. PIFKO: Objection. Vague.</p> <p>8 Q. Income limitations as far as who can</p> <p>9 get health services from your clinics.</p> <p>10 A. No. We serve anybody who walks in</p> <p>11 the clinic.</p> <p>12 Q. Okay. Does -- do the Department of</p> <p>13 Health clinics provide medications that treat</p> <p>14 opioid addiction or withdrawal?</p> <p>15 A. We provide Project DAWN kits.</p> <p>16 Q. Other than Project DAWN kits, does</p> <p>17 the clinic for -- the Department of Health</p> <p>18 clinics provide or prescribe medications to</p> <p>19 treat opioid addiction or withdrawal?</p> <p>20 A. We do not.</p> <p>21 Q. Are you personally a member of the</p> <p>22 Cuyahoga County Opiate Task Force?</p> <p>23 A. I believe in my official capacity I</p> <p>24 am.</p> <p>25 Q. I'm sorry. In your official</p>                                                                                                             |
| <p style="text-align: right;">Page 183</p> <p>1 Q. Is there a particular custodian at</p> <p>2 the Department of Finance who would have the</p> <p>3 budget documents related to the Department of</p> <p>4 Health?</p> <p>5 A. Yes.</p> <p>6 Q. Who is that person?</p> <p>7 A. It would be the finance director,</p> <p>8 her designee.</p> <p>9 Q. Who's the finance director?</p> <p>10 A. Her name is Sharon Dumas.</p> <p>11 Q. Okay. And within the Department of</p> <p>12 Health is there a custodian who would have</p> <p>13 budget documents created for the department?</p> <p>14 A. Yes. I have a finance director.</p> <p>15 Q. Who is that?</p> <p>16 A. Her name is Kimberly Davis Sowell.</p> <p>17 Q. Is it S-o-w-e-l-l?</p> <p>18 A. S-o-w-e-l-l.</p> <p>19 Q. Do fees for permits and licenses go</p> <p>20 towards funding opioid-related programs?</p> <p>21 A. The fees generated by the department</p> <p>22 go back into the general revenue and are then</p> <p>23 distributed to the department.</p> <p>24 Q. The general revenue of the City of</p> <p>25 Cleveland?</p>                                     | <p style="text-align: right;">Page 185</p> <p>1 capacity you are?</p> <p>2 A. Um-hum. Yes.</p> <p>3 Q. Can you give me a high-level</p> <p>4 overview of what your involvement is with that</p> <p>5 task force?</p> <p>6 MR. PIFKO: Objection. Overbroad.</p> <p>7 Calls for a narrative.</p> <p>8 A. Well, unfortunately, it conflicts</p> <p>9 with the standing meeting that I have, so my</p> <p>10 involvement is receiving e-mails of agenda and</p> <p>11 meeting notes, also have at times been invited</p> <p>12 to meetings that take place throughout the</p> <p>13 community that have been hosted by or</p> <p>14 facilitated by this task force, one rather</p> <p>15 recently with the representative from the</p> <p>16 Centers for Disease Control who came to hear</p> <p>17 about this issue here on -- I guess a listening</p> <p>18 tour. And so I try to participate to the extent</p> <p>19 that I can. I run a very busy department, and</p> <p>20 we have a lot of programs and a lot of demands</p> <p>21 on my time.</p> <p>22 Q. With respect to your unofficial</p> <p>23 involvement, did it precede your appointment to</p> <p>24 director of the Cleveland Public Health --</p> <p>25 Cleveland Department of Public Health?</p> |

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| <p style="text-align: right;">Page 186</p> <p>1 MR. PIFKO: Objection.</p> <p>2 Mischaracterizes testimony.</p> <p>3 MR. NAEEM: It's a question.</p> <p>4 A. What is your question?</p> <p>5 Q. The question is, did your</p> <p>6 involvement with the Cuyahoga County Task Force</p> <p>7 precede your involvement -- I'm sorry, your</p> <p>8 appointment as the director of the Department of</p> <p>9 Public Health? Did you do anything for the</p> <p>10 Cuyahoga County Task Force prior to becoming the</p> <p>11 director?</p> <p>12 A. No.</p> <p>13 Q. There's one program you mentioned in</p> <p>14 your description of the services provided by</p> <p>15 your department to opioid abusers or addicts,</p> <p>16 and that was CenterPoint. Do you recall that?</p> <p>17 A. Yes. We have a program called</p> <p>18 CenterPoint. Yes.</p> <p>19 Q. All right. Where does the funding</p> <p>20 for CenterPoint come from?</p> <p>21 A. The staff that managed that program</p> <p>22 was funded by general revenue funds, but the</p> <p>23 operations of it are funded by the ADAMHS board.</p> <p>24 Q. Currently how many spots are</p> <p>25 available for people in that program?</p> | <p style="text-align: right;">Page 188</p> <p>1 A. I believe that these are all</p> <p>2 referrals from the drug court, and I do not</p> <p>3 know, don't believe I know that we would have</p> <p>4 that specific information unless the individual</p> <p>5 client discloses.</p> <p>6 Q. Are the counselors employees of the</p> <p>7 Department of Public Health?</p> <p>8 A. They are.</p> <p>9 Q. Okay. Do those counselors provide</p> <p>10 services to abusers of substances other than</p> <p>11 opioids?</p> <p>12 A. It is my understanding that it is --</p> <p>13 these are referrals from the drug court. I</p> <p>14 don't know for sure what the requirements are</p> <p>15 for entry to this -- to these services or what</p> <p>16 -- what the substance was that brought them to</p> <p>17 the drug court in the first place.</p> <p>18 Q. Okay. So you can't say one way or</p> <p>19 another what the substances are that are</p> <p>20 involved in this program?</p> <p>21 A. No, I cannot.</p> <p>22 Q. Does your department even choose the</p> <p>23 people who are eligible for that program?</p> <p>24 A. We do not.</p> <p>25 Q. So is there anything that limits the</p> |
| <p style="text-align: right;">Page 187</p> <p>1 A. I believe the ratio is one counselor</p> <p>2 to 12 clients, and I believe -- I'm not a</p> <p>3 hundred percent sure if we have two counselors</p> <p>4 on that currently.</p> <p>5 Q. Has that changed at any point in</p> <p>6 time while you've been director of the</p> <p>7 department?</p> <p>8 A. It has, as staff has -- has left the</p> <p>9 department and we've had to hire.</p> <p>10 Q. What is the most amount of</p> <p>11 counselors you've had in that program as</p> <p>12 director?</p> <p>13 A. As director, I don't recall. I</p> <p>14 believe two.</p> <p>15 Q. Does the Department of Public Health</p> <p>16 maintain personal information regarding the</p> <p>17 people that go through that program?</p> <p>18 MR. PIFKO: Objection. Vague.</p> <p>19 Q. Let me -- yeah. And let me ask</p> <p>20 something more specific to move this along.</p> <p>21 A. Please.</p> <p>22 Q. Does the Department of Health</p> <p>23 maintain records regarding the substance that</p> <p>24 was being abused that led to their entry into</p> <p>25 the CenterPoint program?</p>                                                     | <p style="text-align: right;">Page 189</p> <p>1 type of patient that's entered into the program</p> <p>2 from the Department of Health?</p> <p>3 MR. PIFKO: Objection. Foundation.</p> <p>4 A. I don't know.</p> <p>5 Q. Do you know what the Cleveland</p> <p>6 Opioid Response Action Plan is? Have you heard</p> <p>7 of that phrase?</p> <p>8 A. I would need to see -- I've seen so</p> <p>9 many response plans, so I'm not a hundred</p> <p>10 percent sure.</p> <p>11 - - - - -</p> <p>12 (Thereupon, Deposition Exhibit 6,</p> <p>13 Cleveland Opioid Response and Action</p> <p>14 Plan (CORAP) Beginning Bates Stamp</p> <p>15 CLEVE-000183257, was marked for</p> <p>16 purposes of identification.)</p> <p>17 - - - - -</p> <p>18 Q. Handing you what's been marked as</p> <p>19 Deposition Exhibit 6, have you seen that</p> <p>20 document before?</p> <p>21 A. I have, yes. Yes.</p> <p>22 Q. Do you not recognize that as what I</p> <p>23 referred to as the Cleveland Opioid Response</p> <p>24 Action Plan?</p> <p>25 A. I've known it as CORAP, so the</p>                                                                                                                        |

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| <p style="text-align: right;">Page 190</p> <p>1 spelling out the acronym is -- now I understand.</p> <p>2 Q. So we're talking about the same</p> <p>3 thing?</p> <p>4 A. Yes.</p> <p>5 Q. All right. Is this a plan that is</p> <p>6 currently in effect at the City of Cleveland?</p> <p>7 A. It is not.</p> <p>8 Q. When was this plan put together,</p> <p>9 month and year, if you're aware?</p> <p>10 A. So we are always looking for funding</p> <p>11 opportunities to help us address this epidemic,</p> <p>12 and this is just one of them. A number of staff</p> <p>13 came together looking at opportunities to</p> <p>14 address this issue, and our epidemiologists, our</p> <p>15 director of the Office of Mental Health and</p> <p>16 Substance Abuse and grant writer put this</p> <p>17 proposal together for funding from the</p> <p>18 Department of Justice. I believe this was put</p> <p>19 together early 2017.</p> <p>20 Q. Can I assume by one of your prior</p> <p>21 answers that the grant was rejected by the</p> <p>22 Department of Justice?</p> <p>23 A. This -- this was not funded.</p> <p>24 Q. With respect to any of the</p> <p>25 initiatives described in this document, has the</p> | <p style="text-align: right;">Page 192</p> <p>1 the question again.</p> <p>2 Q. Sure.</p> <p>3 Who decides when opioids are</p> <p>4 appropriate for the treatment of chronic pain?</p> <p>5 MR. PIFKO: Same objection.</p> <p>6 Foundation. Calls for expert opinion.</p> <p>7 A. I believe a medical professional.</p> <p>8 Q. Can patients legally get opioid</p> <p>9 products without a prescription?</p> <p>10 MR. PIFKO: Objection. Foundation.</p> <p>11 Calls for speculation. Incomplete hypothetical.</p> <p>12 A. It's not my understanding that they</p> <p>13 can, but I don't know for sure.</p> <p>14 Q. Do you know the types of medical</p> <p>15 professionals in the State of Ohio who are</p> <p>16 permitted to write prescriptions for opioids?</p> <p>17 A. I don't know all of them, no.</p> <p>18 Q. Well, what are the ones you're aware</p> <p>19 of?</p> <p>20 A. Medical doctors, others who have</p> <p>21 prescribing authority.</p> <p>22 Q. Do you know any other than doctors?</p> <p>23 A. I can't say for sure.</p> <p>24 Q. Do you agree that the risk of opioid</p> <p>25 dependence has been known by medical</p>                                                                                         |
| <p style="text-align: right;">Page 191</p> <p>1 City of Cleveland moved forward with those</p> <p>2 initiatives?</p> <p>3 MR. PIFKO: Let the record reflect</p> <p>4 that the witness is reviewing the document.</p> <p>5 A. Our need for resources to address</p> <p>6 this issue from a data perspective to predictive</p> <p>7 analytics and to do the type of outreach and</p> <p>8 education necessary to -- to hopefully have an</p> <p>9 impact on this issue is what we put into this</p> <p>10 proposal. We were not funded and, as such,</p> <p>11 don't have the resources to do this type of</p> <p>12 work.</p> <p>13 Q. Okay. So at this point in time,</p> <p>14 that is not -- those initiatives have not</p> <p>15 been --</p> <p>16 A. We have not been able to. We don't</p> <p>17 have the resources to do it. We have a very</p> <p>18 stretched department to be able to do what we're</p> <p>19 trying to do now.</p> <p>20 Q. Ms. Gordon, who decides when opioids</p> <p>21 are appropriate for treatment of chronic pain;</p> <p>22 do you know?</p> <p>23 MR. PIFKO: Objection. Foundation.</p> <p>24 Calls for expert opinion.</p> <p>25 A. I'm sorry. You would have to ask</p>                 | <p style="text-align: right;">Page 193</p> <p>1 professionals for many years?</p> <p>2 MR. PIFKO: Objection. Calls for</p> <p>3 speculation. Foundation.</p> <p>4 A. Information that was provided to me,</p> <p>5 again, at meetings that I attend and discussions</p> <p>6 that I've had and been involved with, whether</p> <p>7 it's the U.S. Attorney's Office, whether it's</p> <p>8 been with professionals in this field or in --</p> <p>9 around this issue that I've heard this, yes.</p> <p>10 Q. How about the risk of addiction from</p> <p>11 opioids; has that been well known for many</p> <p>12 years?</p> <p>13 MR. PIFKO: Objection. Calls for</p> <p>14 speculation. Foundation.</p> <p>15 A. I believe this has been well</p> <p>16 documented and this is what, again, continues to</p> <p>17 come up at all of these -- these meetings and</p> <p>18 things that I attend regarding this issue and</p> <p>19 broadly in public health, yes.</p> <p>20 Q. Have you ever reviewed the -- well,</p> <p>21 first of all -- strike that.</p> <p>22 Do you know what a package insert</p> <p>23 is? Have you heard that phrase before?</p> <p>24 A. I don't believe I have.</p> <p>25 Q. Have you ever received prescription</p> |

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| <p style="text-align: right;">Page 194</p> <p>1 medication that had a leaflet inside it when you<br/>2 opened up the medication?<br/>3 A. Yes.<br/>4 Q. Have you ever looked to see what the<br/>5 information on that kind of document was for any<br/>6 prescription opioid?<br/>7 A. I have not.<br/>8 Q. Have you done any research to<br/>9 determine what the manufacturers of prescription<br/>10 opioids said about the risk of addiction and<br/>11 abuse in their product information?<br/>12 MR. PIFKO: Objection to the extent<br/>13 the question calls for attorney-client<br/>14 communications.<br/>15 Aside from communications with your<br/>16 lawyers, you can answer.<br/>17 A. I'm sorry. You have to ask it<br/>18 again.<br/>19 Q. Have you done any research to<br/>20 determine what information the manufacturers of<br/>21 prescription opioids provide in their product<br/>22 information, their package insert, regarding the<br/>23 risk of abuse and addiction?<br/>24 MR. PIFKO: Aside from<br/>25 communications with lawyers, you can answer.</p>                                              | <p style="text-align: right;">Page 196</p> <p>1 Q. Did heroine use and abuse exist<br/>2 prior to the 1990s?<br/>3 MR. PIFKO: Objection. Foundation.<br/>4 Q. In this country.<br/>5 MR. PIFKO: Speculation.<br/>6 A. Heroine use has been around for a<br/>7 long time.<br/>8 Q. Do you have any insight into the<br/>9 formulary process for any of the city's employee<br/>10 benefit plans?<br/>11 A. I do not.<br/>12 Q. You told me earlier, I believe, that<br/>13 you have not reviewed the complaint in this<br/>14 case?<br/>15 A. I have not read the entirety of the<br/>16 complaint.<br/>17 Q. Okay. Do you know who the<br/>18 manufacturing defendants are? Had you heard any<br/>19 of their names prior to reviewing the complaint?<br/>20 MR. PIFKO: Objection. Compound.<br/>21 Are we just asking the second question or --<br/>22 MR. NAEEM: Sure.<br/>23 Q. Were any of the names -- were you<br/>24 able to identify the manufacturers of opioids<br/>25 from reading the complaint, just the title of</p> |
| <p style="text-align: right;">Page 195</p> <p>1 A. I have not.<br/>2 Q. We have talked a little bit about<br/>3 the -- the treatment services provided by the<br/>4 Department of Health through various outlets for<br/>5 opioid abuse and addiction. Putting that aside,<br/>6 what we've already talked about, are there any<br/>7 other objectives being pursued by the Department<br/>8 of Health to reduce prescription drug abuse,<br/>9 prescription opioid abuse?<br/>10 A. Specifically on prescription opioid<br/>11 abuse, not specifically.<br/>12 Q. Do you know when prescription<br/>13 opioids initially began being marketed and<br/>14 available to patients in the United States?<br/>15 A. I don't know specifically, no.<br/>16 Q. Do you know the decade when that<br/>17 might have been?<br/>18 A. The -- say the question again.<br/>19 Q. Sure.<br/>20 Even by decade do you know when<br/>21 prescription opioids became available to<br/>22 patients in the United States?<br/>23 A. I don't know specifically, but I<br/>24 believe that this started in the -- perhaps<br/>25 around the 1990s.</p> | <p style="text-align: right;">Page 197</p> <p>1 the complaint?<br/>2 A. Some of the names were familiar to<br/>3 me.<br/>4 Q. Do you know what medications each<br/>5 defendant specifically manufactures?<br/>6 A. I don't know that level of<br/>7 specificity, no.<br/>8 Q. Do you have any personal knowledge<br/>9 regarding the marketing practices of any of the<br/>10 manufacturing defendants beyond what you read in<br/>11 the complaint?<br/>12 A. I don't know.<br/>13 Q. Any personal -- do you have any<br/>14 personal knowledge regarding any statements made<br/>15 by any of the manufacturing defendants to<br/>16 prescribers about their products other than what<br/>17 you've read in the complaint?<br/>18 MR. PIFKO: Objection to the extent<br/>19 the question calls for attorney-client<br/>20 communications.<br/>21 Other than communications with<br/>22 counsel, you can answer.<br/>23 A. You'll have to repeat the question.<br/>24 Q. Sure.<br/>25 Other than what you may have read in</p>   |

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| <p style="text-align: right;">Page 198</p> <p>1 the complaint, do you have any personal<br/>2 knowledge regarding statements made by any of<br/>3 the manufacturing defendants to prescribers<br/>4 regarding their prescription opioid products?<br/>5 MR. PIFKO: Limit your answer to<br/>6 communications outside of your discussions with<br/>7 counsel or information outside of your<br/>8 discussions with counsel.<br/>9 A. I don't know specifically.<br/>10 Q. Do you have an understanding of how<br/>11 prescription opioids move from manufacturers<br/>12 through the chain of distribution to patients?<br/>13 MR. PIFKO: Same objection with<br/>14 respect to attorney-client privilege.<br/>15 A. Very, very broadly but not with a<br/>16 level of specificity.<br/>17 Q. Okay. What is your broad<br/>18 understanding?<br/>19 A. Broad sense, manufacturers through<br/>20 distributors to -- to the -- to pharmacies,<br/>21 which is where then the individuals would have<br/>22 access to -- directly to the substances.<br/>23 Q. Okay. And nothing more specific<br/>24 than that, that's your understanding?<br/>25 A. That's my understanding.</p> | <p style="text-align: right;">Page 200</p> <p>1 and mitigation strategy is?<br/>2 MR. PIFKO: Objection. Overbroad.<br/>3 A. As it relates to what?<br/>4 Q. To prescription drugs.<br/>5 A. No, I don't.<br/>6 Q. Have you heard the phrase REMS in<br/>7 the context of prescription drugs?<br/>8 A. I don't believe that I have, no.<br/>9 Q. Do you have any knowledge regarding<br/>10 how the number of opioid prescriptions has<br/>11 changed in the City of Cleveland locally -- I'm<br/>12 sorry, since 2010?<br/>13 MR. PIFKO: Aside from<br/>14 communications with your counsel.<br/>15 A. Ask the question one more time,<br/>16 please.<br/>17 Q. Sure.<br/>18 Do you have any knowledge regarding<br/>19 how the number of opioid prescriptions has<br/>20 changed in each year since 2010 in the City of<br/>21 Cleveland?<br/>22 MR. PIFKO: Objection to the extent<br/>23 the question calls for attorney-client<br/>24 communication.<br/>25 Aside from communications with</p>                                                                                                    |
| <p style="text-align: right;">Page 199</p> <p>1 Q. Do you know whether or not<br/>2 manufacturing defendants can legally send opioid<br/>3 prescriptions -- opioid products directly to<br/>4 patients?<br/>5 MR. PIFKO: Objection to the extent<br/>6 the question calls for communications with<br/>7 counsel.<br/>8 Aside from communications with<br/>9 counsel, you can answer.<br/>10 A. I do not know that that is a legal<br/>11 practice.<br/>12 MR. PIFKO: If you're in a topical<br/>13 pause, do you want to take a short break?<br/>14 MR. NAEEM: Sure.<br/>15 THE VIDEOGRAPHER: Going off the<br/>16 record. The time is 3:05.<br/>17 (Recess had.)<br/>18 THE VIDEOGRAPHER: Back on the<br/>19 record, 3:25.<br/>20 BY MR. NAEEM:<br/>21 Q. Ms. Gordon, before we took a break,<br/>22 we were talking a little bit about manufacturers<br/>23 of opioids. I just had one last question on<br/>24 that.<br/>25 Do you know what a risk evaluation</p>                                                                                                                                                                                                            | <p style="text-align: right;">Page 201</p> <p>1 counsel, you can answer.<br/>2 A. I don't know that we have that<br/>3 information specific just to the City of<br/>4 Cleveland.<br/>5 Q. What jurisdiction do you have that<br/>6 information for?<br/>7 A. I cannot speak specifically to which<br/>8 jurisdiction or what jurisdictions we have that.<br/>9 I believe we have seen information nationally,<br/>10 but I -- I cannot recall if I've seen such local<br/>11 data.<br/>12 Q. Have you seen State of Ohio data?<br/>13 MR. PIFKO: Again, objection to the<br/>14 extent the question calls for attorney-client<br/>15 communications.<br/>16 You can answer aside from that.<br/>17 A. I believe that this information is<br/>18 contained in some of the reports that I have<br/>19 looked at as pertains to this issue.<br/>20 Q. Okay. And has the number of opioid<br/>21 prescriptions in the State of Ohio changed since<br/>22 2010?<br/>23 MR. PIFKO: Objection. Foundation.<br/>24 A. It is my recollection that there has<br/>25 been a significant increase since 2010.</p> |

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| <p style="text-align: right;">Page 202</p> <p>1 Q. Significant increase in the number<br/>2 of prescription opioids provided to people in<br/>3 the State of Ohio since 2010?<br/>4 A. Yes.<br/>5 Q. And that's based on data from where<br/>6 that you've seen?<br/>7 MR. PIFKO: Again, objection to the<br/>8 extent the question calls for attorney-client<br/>9 communication.<br/>10 You can answer it aside from<br/>11 communications with counsel.<br/>12 A. Information is provided in a number<br/>13 of sources. I've mentioned before I attend a<br/>14 lot of meetings pertaining to this issue, try to<br/>15 look at reports and other information that is<br/>16 available to -- as we are collectively trying to<br/>17 deal with this epidemic in the city.<br/>18 Q. Well, is there any particular<br/>19 document that you can point to which shows that<br/>20 the number of prescription opioids provided to<br/>21 citizens in the State of Ohio in each year from<br/>22 2010 to 2017 has increased?<br/>23 A. It is my recollection, seeing some<br/>24 of this data. I don't believe that I can recall<br/>25 which document or documents I have that data</p> | <p style="text-align: right;">Page 204</p> <p>1 to.<br/>2 The types of experts and individuals<br/>3 at those meetings provide additional information<br/>4 that help us to try to understand what is<br/>5 contributing to these trends because there are<br/>6 times when Fentanyl-related deaths have gone up<br/>7 or down over -- again, over the course of time,<br/>8 but these are part of an entire data set that<br/>9 looks at the toxicology of all the deaths in --<br/>10 that come through the medical examiner's office.<br/>11 And it's all part of this entire crisis. People<br/>12 are dying, and people are dying related to<br/>13 overdoses, and overdoses that we do not believe<br/>14 started entirely because they got hooked on one<br/>15 of these synthetic opioids, that there was a<br/>16 pathway to them which created the addiction, and<br/>17 thus led to their overdose and, unfortunately,<br/>18 for many of them, their deaths, their demise.<br/>19 Q. Okay. I appreciate that,<br/>20 Ms. Gordon, but what my question was, was how<br/>21 has the rate of fentanyl overdoses changed over<br/>22 time. You didn't know going back to 2010<br/>23 whether you had seen that data from the ME, so I<br/>24 had asked, well, how about the last few years,<br/>25 how has that rate changed. Do you know how the</p> |
| <p style="text-align: right;">Page 203</p> <p>1 from.<br/>2 Q. While I'm looking for that, let me<br/>3 ask you about fentanyl overdose deaths in the<br/>4 City of Cleveland or Cuyahoga County.<br/>5 Do you have any knowledge regarding<br/>6 how those deaths have changed over the course of<br/>7 time from 2010 to 2017?<br/>8 MR. PIFKO: Objection. Vague.<br/>9 Overbroad.<br/>10 A. I don't know what the specific time<br/>11 frame is, if the reports that I have seen from<br/>12 the medical examiner goes back to 2010.<br/>13 Q. Okay. Well, what is the trend in at<br/>14 least the later years based on your<br/>15 understanding?<br/>16 A. Of fentanyl deaths, is that your<br/>17 question?<br/>18 Q. Yes.<br/>19 A. You know, we see -- we've looked at<br/>20 these reports over the course of time, and<br/>21 this -- these numbers can rise and fall. One of<br/>22 the things that gets discussed at especially the<br/>23 U.S. Attorney's Office meetings is what that<br/>24 might be contributing -- what the contributing<br/>25 factors are and what they might be related back</p>                                                                    | <p style="text-align: right;">Page 205</p> <p>1 rate has changed?<br/>2 A. It's my recollection that that rate<br/>3 has gone up as part of -- or in the toxicology<br/>4 reports from individuals, that that may have<br/>5 been in their -- in their blood at time of<br/>6 death, and when they did the -- either an<br/>7 autopsy or tested these individuals.<br/>8 Q. Okay. So you believe the rate has<br/>9 gone up?<br/>10 A. It is my recollection that it has<br/>11 gone up.<br/>12 Q. Okay. And do you have an<br/>13 understanding regarding the source of that<br/>14 fentanyl and whether it was fentanyl that was<br/>15 prescribed legally or whether it was illicit<br/>16 fentanyl that was driving the increase in<br/>17 overdose deaths?<br/>18 MR. PIFKO: Objection to the extent<br/>19 the question mischaracterizes prior testimony.<br/>20 Assumes facts not in evidence.<br/>21 A. I believe that people who have<br/>22 become addicted to painkillers and opiates have<br/>23 sought pathways to feed their addiction and have<br/>24 resorted to illegal means, which has -- some of<br/>25 which are illegal sources of fentanyl, and that</p>                                                                                                                                                                               |

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1 has been a contributing factor.  
 2 Q. Okay. Well, in any particular year  
 3 there's a number of fentanyl deaths that the  
 4 medical examiner reports, and you've seen that  
 5 data, correct?  
 6 A. I have seen many reports from the  
 7 medical examiner.  
 8 Q. Okay. And some of those reports are  
 9 fentanyl deaths, correct?  
 10 A. They do track fentanyl deaths, yes.  
 11 Q. And when you get those reports that  
 12 track fentanyl deaths, do you get any  
 13 information from the medical examiner about  
 14 whether those fentanyl deaths were from  
 15 prescription fentanyl or illicit fentanyl?  
 16 A. No. They do not recognize the  
 17 source, no.  
 18 MR. NAEEM: Then I don't have  
 19 anything further at this time, so can we go off  
 20 the record?  
 21 THE VIDEOGRAPHER: Going off the  
 22 record. The time is 3:35.  
 23 (Recess had.)  
 24 THE VIDEOGRAPHER: Back on the  
 25 record. The time is 3:48.

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1 EXAMINATION OF MERLE GORDON  
 2 BY MR. SALIMBENE:  
 3 Q. Ms. Gordon, my name is Mike  
 4 Salimbene. I'm one of the attorneys who  
 5 represents a different defendant in the case and  
 6 I'm going to start asking you some questions now  
 7 as soon as I strap up with my microphone.  
 8 Do you know which distributor  
 9 defendants you sued in this case, Cleveland sued  
 10 in this case I should say?  
 11 MR. PIFKO: Objection to the extent  
 12 the question calls for legal -- attorney-client  
 13 communications.  
 14 You can answer aside from  
 15 communications with your lawyers.  
 16 MR. BOEHM: Can you clarify if he's  
 17 instructing the witness not to answer that  
 18 question?  
 19 MR. PIFKO: I'm instructing her not  
 20 to provide attorney-client communications. If  
 21 she can answer the question without revealing  
 22 communications, she can answer the question.  
 23 That's what I'm telling her.  
 24 A. I know that there are a number of  
 25 firms and organizations listed. I don't know

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1 any of them specifically offhand.  
 2 Q. Okay. Fair to say you don't know  
 3 the companies' names?  
 4 A. Not offhand, no.  
 5 Q. Do you know the number, how many  
 6 distributor defendants were named in this  
 7 lawsuit?  
 8 A. Not specifically, no.  
 9 Q. Okay. Have you ever heard the name  
 10 "AmerisourceBergen" before?  
 11 A. Not that I recall.  
 12 Q. Or how about the name "Cardinal,"  
 13 not as it pertains to wildlife but a  
 14 distribution company?  
 15 A. Not necessarily, no.  
 16 Q. Okay. McKesson?  
 17 A. McKesson is a name I'm somewhat  
 18 familiar with.  
 19 Q. Do you know what they do, have any  
 20 knowledge of their business operations?  
 21 A. Not necessarily, no.  
 22 Q. Do you know what a distributor does  
 23 in the pharmaceutical supply chain?  
 24 MR. PIFKO: Again, aside from  
 25 communications with your lawyers, you can

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1 answer.  
 2 A. Broadly, part of the supply chain  
 3 from the manufacturers, distributors and  
 4 pharmacies, part of the supply chain. That's to  
 5 the extent that I know, and --  
 6 Q. I didn't mean to cut you off. I'm  
 7 sorry. Within that chain do you have any  
 8 specifics about the role distributor defendants  
 9 play?  
 10 A. Not specifically, no.  
 11 Q. Would you agree that distributors  
 12 don't manufacture prescription opioids?  
 13 MR. PIFKO: Objection. Foundation.  
 14 A. I don't know that for sure, but I'm  
 15 assuming if it's -- they're distributors, that's  
 16 what they do, is distribute, not manufacture.  
 17 Q. Not manufacture, okay.  
 18 Do you agree that distributor  
 19 defendants do not market prescription opioids to  
 20 prescribing physicians?  
 21 MR. PIFKO: Objection. Foundation.  
 22 Assumes facts not in evidence.  
 23 A. I don't know with any specificity.  
 24 Q. Do you agree that distributors do  
 25 not draft the warnings that accompany

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
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| <p style="text-align: right;">Page 210</p> <p>1 FDA-approved prescription opioid medications?</p> <p>2 MR. PIFKO: Objection. Foundation.</p> <p>3 A. I do not know that for sure.</p> <p>4 Q. Do you know one way or the other</p> <p>5 whether distributor defendants play a role in</p> <p>6 determining the quotas for opioid products that</p> <p>7 are set by the DEA?</p> <p>8 MR. PIFKO: Objection. Foundation.</p> <p>9 A. I do not know that specifically, no.</p> <p>10 Q. Do you know one way or the other</p> <p>11 whether distributors interact with patients in</p> <p>12 the course of their care for a particular</p> <p>13 condition?</p> <p>14 A. Do not know.</p> <p>15 Q. Do you know one way or the other</p> <p>16 whether distributors interact with doctors or</p> <p>17 prescribers in the course of prescribing</p> <p>18 medications to patients?</p> <p>19 A. I do not know.</p> <p>20 Q. Do you know one way or the other</p> <p>21 whether distributors fill prescriptions written</p> <p>22 by physicians?</p> <p>23 A. I do not know.</p> <p>24 Q. Do you know one way or the other</p> <p>25 whether distributors counsel patients about</p>        | <p style="text-align: right;">Page 212</p> <p>1 particular patient?</p> <p>2 A. Sorry. Rephrase.</p> <p>3 Q. Sure.</p> <p>4 Does a distributor defendant know</p> <p>5 the reason, diagnosis say, why a doctor writes a</p> <p>6 prescription for a particular plaintiff --</p> <p>7 patient?</p> <p>8 MR. PIFKO: Objection. Foundation.</p> <p>9 A. I would not know.</p> <p>10 Q. Okay. Does a distributor know the</p> <p>11 patient's diagnosis?</p> <p>12 MR. PIFKO: Objection. Foundation.</p> <p>13 A. I would not know.</p> <p>14 Q. Does a distributor know whether the</p> <p>15 patient is suffering from chronic, incurable</p> <p>16 pain caused by terminal cancer?</p> <p>17 MR. PIFKO: Objection. Foundation.</p> <p>18 A. I would not know that.</p> <p>19 Q. Does a distributor know whether a</p> <p>20 patient pays for a prescription using cash or</p> <p>21 their insurance?</p> <p>22 MR. PIFKO: Objection. Foundation.</p> <p>23 A. I would not know that.</p> <p>24 Q. Do you agree that distributors are</p> <p>25 regulated?</p>                                                                                                                                     |
| <p style="text-align: right;">Page 211</p> <p>1 proper medication use?</p> <p>2 A. I do not know.</p> <p>3 Q. As you sit here today, can you</p> <p>4 recall any statement that was made to you by</p> <p>5 someone you knew to be working for a distributor</p> <p>6 defendant in this lawsuit?</p> <p>7 A. No.</p> <p>8 Q. How about anybody in your</p> <p>9 department; are you aware of any statements made</p> <p>10 by a distributor defendant to anybody in the</p> <p>11 Department of Public Health?</p> <p>12 A. No, I'm not aware.</p> <p>13 Q. Do you know whether distributors</p> <p>14 know the identity of an individual who receives</p> <p>15 one of the opioids that it ships?</p> <p>16 A. No, I have no idea.</p> <p>17 Q. Do you have any basis to disagree</p> <p>18 with my contention that distributor defendants</p> <p>19 do not know the identity of the end user of a</p> <p>20 particular prescription opioid?</p> <p>21 MR. PIFKO: Objection to the extent</p> <p>22 the question assumes facts not in evidence.</p> <p>23 A. I would not know that.</p> <p>24 Q. Okay. Do distributors know the</p> <p>25 reason a medication is prescribed to a</p> | <p style="text-align: right;">Page 213</p> <p>1 MR. PIFKO: Objection. Foundation.</p> <p>2 Calls for a legal conclusion.</p> <p>3 A. No knowledge of that.</p> <p>4 Q. Okay. Do you know whether the State</p> <p>5 of Ohio has regulations in place that govern the</p> <p>6 conduct of distributor defendants?</p> <p>7 A. Say that again.</p> <p>8 Q. Sure.</p> <p>9 Do you know whether the State of</p> <p>10 Ohio has regulations in place that govern the</p> <p>11 conduct of distributor defendants?</p> <p>12 A. Distributor defendants, not that I</p> <p>13 know of. I don't know.</p> <p>14 Q. You don't know one way or the other?</p> <p>15 A. I don't know one way or the other.</p> <p>16 Q. Okay. How about the federal</p> <p>17 government; do you know one way or the other</p> <p>18 whether there are federal laws and regulations</p> <p>19 that govern the conduct of pharmaceutical</p> <p>20 distributors?</p> <p>21 MR. PIFKO: Aside from</p> <p>22 communications with counsel, you can answer.</p> <p>23 A. Information that's been provided to</p> <p>24 me by counsel is what I've -- I know, but</p> <p>25 otherwise, I do not, I have no knowledge of that</p> |

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1 specifically.

2 Q. So prior to the events that gave

3 rise to you meeting with attorneys, you had no

4 knowledge of regulations at the federal level

5 that pertain to pharmaceutical distributors; is

6 that fair to say?

7 A. What I -- so, as I've said many

8 times here today, a lot of information is shared

9 at meetings that I attend and --

10 Q. I don't mean to cut you off. I

11 heard a lot about the meetings. I don't

12 think -- you can finish --

13 MR. PIFKO: You cannot do that.

14 Q. You can finish your answer and then

15 we can see if you answered the question. You

16 were talking about your meetings.

17 A. I attend a lot of meetings. It's my

18 capacity as the director of the Cleveland

19 Department of Public Health. It's one of the

20 things that I do regularly. My ability to

21 understand issues to any level of degree that I

22 can, managing a lot of issues in the City of

23 Cleveland, and that --

24 MR. SALIMBENE: I asked about

25 federal regulations. I move to strike all this

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1 as non-responsive. This is a waste of time.

2 It's filibustering.

3 MR. PIFKO: No, it's not. She's

4 answering the question to the best of her

5 ability.

6 MR. SALIMBENE: No. No. No. I

7 said federal regulations governing the conduct

8 of distributor defendants.

9 MR. PIFKO: You're cutting her off.

10 MR. SALIMBENE: We're talking about

11 meetings. I am cutting her off now because it's

12 been going on for 30 seconds and it's completely

13 non-responsive.

14 MR. PIFKO: She can answer the

15 question however she pleases. She can. If you

16 want to make a motion about it after or do

17 whatever you want to do, you can do it.

18 MR. SALIMBENE: We'll be leaving the

19 deposition open.

20 MR. PIFKO: She has the right to

21 give an answer that she wants to do. If you

22 don't like her answer, you can ask her a

23 follow-up question, you can make a motion, you

24 can do whatever you want, but you cannot cut her

25 off, okay. If you do that again, I'm going to

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1 tell the judge that you're cutting her off.

2 MR. SALIMBENE: Honestly, I'm fine

3 with that. You know, in this case when I say

4 this is the most --

5 MR. PIFKO: She's trying to

6 articulate. You asked her do you have any

7 knowledge. She's trying to articulate a basis

8 of knowledge and you cut her off.

9 MR. SALIMBENE: I just asked what

10 the knowledge is. I didn't ask for the basis.

11 I said what is the knowledge.

12 MR. PIFKO: She's trying to explain

13 it to you.

14 MR. SALIMBENE: I disagree

15 completely.

16 MR. PIFKO: I disagree with you.

17 Obviously you don't like her answer, but that's

18 her answer.

19 Q. You can continue.

20 MR. BOEHM: She might need the

21 question reread.

22 Q. You know what, yes. I mean, the

23 question was basically, are you aware of any

24 federal regulation that govern the conduct of

25 distributors of pharmaceutical medications?

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1 A. Very, very basic understanding based

2 on information that I have gathered in the

3 number of meetings and information that's

4 provided to me in my capacity as the director of

5 the Cleveland Department of Public Health.

6 Q. What is the information? What is

7 the information? Not how did you obtain it.

8 What is the information you are aware of?

9 A. I know that there are some

10 regulations. I don't know them verbatim and I

11 don't know them specifically.

12 Q. Okay. That's perfect.

13 Are you aware of any DEA regulations

14 that pertain to distributors of pharmaceutical

15 products?

16 MR. PIFKO: Aside from your

17 communications with counsel, you can answer.

18 A. I have, again, a very, very basic

19 understanding of some reporting requirements to

20 the DEA.

21 Q. Okay. And what is that

22 understanding? What is that basic

23 understanding?

24 MR. PIFKO: Again, aside from

25 communications with counsel, you can answer.

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| <p style="text-align: right;">Page 218</p> <p>1 A. A basic understanding of the volume<br/>2 produced and distributed.<br/>3 Q. Can you explain that?<br/>4 A. Again, I have a very basic<br/>5 understanding of the -- the numbers of<br/>6 pharmaceuticals that distributors provide to<br/>7 pharmacies in the entire chain.<br/>8 Q. What about the numbers? What is the<br/>9 regulation that you're aware of?<br/>10 A. I don't know the actual regulation.<br/>11 Q. If a distributor sells a medication<br/>12 to a particular pharmacy, do you know if the<br/>13 distributor knows whether that pharmacy has<br/>14 received orders from other distributors?<br/>15 A. I would not know that.<br/>16 Q. Do you know what a -- strike that.<br/>17 Do you know whether distributor<br/>18 defendants are licensed by the DEA?<br/>19 A. I don't know.<br/>20 Q. Do you believe, other than, you<br/>21 know, discussions with counsel, that any<br/>22 distributor defendant in this lawsuit was not at<br/>23 all times properly registered with the DEA?<br/>24 A. I do not know.<br/>25 Q. Do you know what this lawsuit claims</p> | <p style="text-align: right;">Page 220</p> <p>1 any other time aside from communications you've<br/>2 had with counsel; is that fair?<br/>3 A. It's fair.<br/>4 Q. Do you have any personal knowledge<br/>5 of something known as suspicious order<br/>6 reporting?<br/>7 A. No, I do not.<br/>8 Q. Have you ever discussed suspicious<br/>9 order reporting with anybody in your role as the<br/>10 director of the Department of Public Health?<br/>11 A. I have no recollection of that, no.<br/>12 Q. Do you agree that distributors of<br/>13 pharmaceutical medications play an important<br/>14 role in promoting public health in Cleveland?<br/>15 MR. PIFKO: Foundation.<br/>16 You can answer.<br/>17 Q. I'm asking you to speak as a top<br/>18 public health official in Cleveland.<br/>19 A. Do I agree to what?<br/>20 Q. That distributor defendants,<br/>21 distributors of pharmaceutical medications, play<br/>22 an important role in promoting public health<br/>23 here in Cleveland.<br/>24 MR. PIFKO: Foundation. Overbroad.<br/>25 Vague.</p> |
| <p style="text-align: right;">Page 219</p> <p>1 distributor defendants either did or failed to<br/>2 do that gave rise or gives rise to their alleged<br/>3 liability in this lawsuit?<br/>4 MR. PIFKO: Objection to the extent<br/>5 the question calls for a legal conclusion,<br/>6 foundation, and instruction with respect to any<br/>7 attorney-client communications.<br/>8 Aside from communications, you can<br/>9 answer.<br/>10 A. You have to repeat the question.<br/>11 MR. SALIMBENE: Can you read it<br/>12 back? I'm sorry.<br/>13 (Record read.)<br/>14 MR. SALIMBENE: Thank you.<br/>15 A. Very, very peripheral knowledge in<br/>16 terms of reporting numbers, but I don't know to<br/>17 any level of specificity.<br/>18 Q. Okay. And what is the source of<br/>19 that knowledge that you just described?<br/>20 MR. PIFKO: Aside from the<br/>21 communications with counsel, you can answer.<br/>22 A. Knowledge comes from -- from<br/>23 counsel.<br/>24 Q. Okay. So no knowledge obtained in<br/>25 your role as the director of public health or at</p>                                                           | <p style="text-align: right;">Page 221</p> <p>1 A. No knowledge of that.<br/>2 Q. You deal with a number of non-opioid<br/>3 issues, correct? I think you testified about<br/>4 several of them earlier today, right?<br/>5 A. I do.<br/>6 Q. Your residents have things like<br/>7 diabetes, true?<br/>8 A. Yes.<br/>9 Q. Cardiovascular disease, true?<br/>10 A. Yes.<br/>11 Q. Sexually transmitted infections you<br/>12 mentioned, correct?<br/>13 A. Yes.<br/>14 Q. Administering flu vaccines, correct?<br/>15 A. Yes.<br/>16 Q. Who do you think distributes the<br/>17 medications that treat those conditions that<br/>18 people in Cleveland suffer from?<br/>19 MR. PIFKO: Objection. Calls for<br/>20 speculation. Foundation.<br/>21 A. Obviously those come from -- those<br/>22 are pharmaceutical medicines that are provided<br/>23 to individuals.<br/>24 Q. Do you agree that your citizens here<br/>25 in Cleveland benefit from having access to</p>                                                                                             |

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| <p style="text-align: right;">Page 222</p> <p>1 prescription medications?</p> <p>2 MR. PIFKO: Objection. Incomplete</p> <p>3 hypothetical. Overbroad.</p> <p>4 A. Surely there are some that are</p> <p>5 helpful and beneficial to people.</p> <p>6 Q. Can you think of any circumstance</p> <p>7 where the citizens here in Cleveland would be</p> <p>8 better off without access to prescription</p> <p>9 medications? Strike that. Strike that.</p> <p>10 Do you agree your citizens are</p> <p>11 better off if they can fill prescriptions for</p> <p>12 the medications that are prescribed by their</p> <p>13 doctors, that they can go to a pharmacy, present</p> <p>14 the script, and they'll get that medication?</p> <p>15 MR. PIFKO: Objection.</p> <p>16 A. You're assuming that --</p> <p>17 MR. PIFKO: Wait. Wait. Wait.</p> <p>18 Objection. Incomplete hypothetical.</p> <p>19 Foundation. Calls for expert opinion.</p> <p>20 You can answer.</p> <p>21 Q. Sorry. Go ahead.</p> <p>22 A. You're assuming that everybody can</p> <p>23 go to a pharmacy and get their prescription</p> <p>24 filled or even have access to medical</p> <p>25 professionals. This is one of the things that</p> | <p style="text-align: right;">Page 224</p> <p>1 E-Mail from Merle Gordon to Merle</p> <p>2 Gordon Bates-Stamped</p> <p>3 CLEVE-000188104, was marked for</p> <p>4 purposes of identification.)</p> <p>5 - - - - -</p> <p>6 - - - - -</p> <p>7 (Thereupon, Deposition Exhibit 8,</p> <p>8 Document Entitled "August 18, 2016</p> <p>9 Notes," Beginning Bates Stamp</p> <p>10 CLEVE_000188105, was marked for</p> <p>11 purposes of identification.)</p> <p>12 - - - - -</p> <p>13 Q. And I believe what I marked here,</p> <p>14 the first document is from you and also to you</p> <p>15 and the subject is opioid notes. Do you see</p> <p>16 where I've read that?</p> <p>17 A. I do.</p> <p>18 - - - - -</p> <p>19 (Thereupon, Deposition Exhibit 8,</p> <p>20 Document Entitled "August 18, 2016</p> <p>21 Notes," Beginning Bates Stamp</p> <p>22 CLEVE_000188105, was marked for</p> <p>23 purposes of identification.)</p> <p>24 - - - - -</p> <p>25 Q. And then I'll represent to you that</p>                                                                                                                                                           |
| <p style="text-align: right;">Page 223</p> <p>1 we realize in the City of Cleveland that is a</p> <p>2 big issue for us in terms of access, so in terms</p> <p>3 of the totality of public health, that we try to</p> <p>4 make sure that we are addressing all of those</p> <p>5 issues for -- for individuals and families in</p> <p>6 the city.</p> <p>7 Q. Access is a good thing, true, access</p> <p>8 to healthcare, correct?</p> <p>9 MR. PIFKO: Overbroad. Vague.</p> <p>10 Incomplete hypothetical.</p> <p>11 A. Access to healthcare is a good</p> <p>12 thing.</p> <p>13 Q. So access, including to prescription</p> <p>14 medications, is a good thing in terms of</p> <p>15 promoting public health, fair?</p> <p>16 MR. PIFKO: Objection. Incomplete</p> <p>17 hypothetical. Overbroad. Vague.</p> <p>18 A. That is part of public health, yes.</p> <p>19 Q. We're going to start looking at a</p> <p>20 few documents now. So I'm going to mark these</p> <p>21 as 7 and 8, and these are Bates ending -- it's</p> <p>22 Cleveland and ending 188104 and 188105</p> <p>23 respectively.</p> <p>24 - - - - -</p> <p>25 (Thereupon, Deposition Exhibit 7,</p>                                       | <p style="text-align: right;">Page 225</p> <p>1 the next exhibit, Exhibit 8, is what was</p> <p>2 produced to us as the attachment to that e-mail.</p> <p>3 So fair to say here you were</p> <p>4 e-mailing yourself some notes you took about, it</p> <p>5 looks like, a meeting. And there's individuals</p> <p>6 listed at the top of Exhibit 8. Do you see</p> <p>7 where I am?</p> <p>8 A. I do.</p> <p>9 Q. Okay. Now, August 2016, fair to say</p> <p>10 that's soon after you started the job as the</p> <p>11 director of public health?</p> <p>12 A. Yes.</p> <p>13 Q. Okay. And do you recall what the</p> <p>14 purpose of this meeting was?</p> <p>15 A. To some degree, yes.</p> <p>16 Q. And what was that?</p> <p>17 A. We were asked by the mayor's -- from</p> <p>18 the mayor to come up with a set of</p> <p>19 recommendations of how to deal with this crisis</p> <p>20 in the City of Cleveland.</p> <p>21 Q. Okay. And these are your notes from</p> <p>22 that meeting, correct?</p> <p>23 A. My name is not on this document.</p> <p>24 Q. Okay. So these are at least, at a</p> <p>25 minimum, notes from the meeting, whether you</p> |

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1 took them or somebody else recorded them?

2 MR. PIFKO: Objection.

3 Q. You don't recall that today?

4 MR. PIFKO: Objection. Foundation.

5 Q. What is Exhibit 8? What does that

6 document show?

7 MR. PIFKO: Objection. Overbroad.

8 A. The document has a date at the top

9 and it says "Notes" and indicates individuals

10 that were most likely at this meeting. My name

11 is not on this document.

12 Q. So do you recall attending this

13 meeting or no? I thought before you testified

14 you may have, but --

15 A. I believe I attended this meeting,

16 yes.

17 Q. So is it fair to say that since your

18 name is not listed and you attended, it's likely

19 that you did, in fact, take these notes and

20 didn't record your own name as being present?

21 MR. PIFKO: Objection.

22 Argumentative. Assumes facts not in evidence.

23 Q. I'm just asking if that's a

24 reasonable explanation for what --

25 A. It's reasonable.

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1 Q. Okay. Is it fair to say, as you

2 look at this document and all the

3 recommendations from various folks, that there's

4 nothing in this document that speaks to the

5 conduct of any distributor of prescription

6 opioids?

7 MR. PIFKO: Objection. The document

8 speaks for itself. Mine is double-sided.

9 MR. SALIMBENE: I'm ever conscious

10 of the environment, so I printed one

11 single-sided and the other copies double-sided.

12 I don't know what the deposition protocol says

13 about that, I got to say.

14 MR. PIFKO: I'm okay with this

15 document --

16 MR. SALIMBENE: Okay.

17 MR. PIFKO: -- with respect to its

18 double-sidedness.

19 MR. SALIMBENE: Limited to that, of

20 course.

21 A. I do not see distributors identified

22 in this document.

23 - - - - -

24 (Thereupon, Deposition Exhibit 9,

25 Memo from M. Gordon to Chief McGrath

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1 and Director Griffin, dated

2 September 6, 2016, Beginning Bates

3 Stamp CLEVE\_000187963, was marked

4 for purposes of identification.)

5 - - - - -

6 Q. Okay. And then -- so you mentioned

7 this meeting with the mayor, and I'm going to

8 mark now what I think is a document -- it's

9 Bates number CLEVE 187963 and the subject line

10 of this is "Re: Recommendations for the City of

11 Cleveland Mayor Frank Jackson to address the

12 opioid addiction epidemic in Cleveland." Do you

13 see where I've read that?

14 MR. PIFKO: Hold on. She just got

15 the document.

16 MR. SALIMBENE: Sure.

17 MR. PIFKO: Take your time to review

18 the document.

19 A. Yes, I see that.

20 Q. And this document is from you, true?

21 A. That is what it says, yes.

22 Q. Do you agree that you are the top

23 public health official in Cleveland?

24 A. I am the director of the Cleveland

25 Department of Public Health.

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1 Q. Would you characterize yourself as

2 in Cleveland I am the top health official?

3 A. Often that is what the director is

4 referred to as, yes.

5 Q. I'm asking you would you refer to

6 yourself as the top health official in

7 Cleveland?

8 A. Often that is what I am referred to

9 as, yes.

10 - - - - -

11 (Thereupon, Deposition Exhibit 10,

12 E-Mail String Beginning Bates Stamp

13 CLEVE\_000189085, was marked for

14 purposes of identification.)

15 - - - - -

16 Q. So this is 10, and right there --

17 it's an e-mail --

18 MR. PIFKO: Hold on.

19 Q. Okay. Sure. It's an e-mail from

20 you. The Bates is 189085, also CLEVE. It says,

21 Hello, Melanie. And then number 2 says, "In

22 Cleveland I am the top health official." Do you

23 see where I've read that?

24 MR. PIFKO: Take your time to review

25 the document.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
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| <p style="text-align: right;">Page 230</p> <p>1 Q. That's the only question I have is<br/>2 number 2 says "In Cleveland I am the top health<br/>3 official." Did I read that correctly?<br/>4 A. Yes.<br/>5 Q. And that's an e-mail you sent, true?<br/>6 A. Yes.<br/>7 Q. Okay. We can go back to the other<br/>8 document, the mayor's report.<br/>9 Now, what was the purpose of this<br/>10 mayor's report? I mean, I believe you testified<br/>11 about this earlier, but just because we're here<br/>12 again, if you could describe why you guys put<br/>13 together these recommendations.<br/>14 A. Sure.<br/>15 So the mayor asked, as he regularly<br/>16 does, to put together a set of recommendations<br/>17 for the city to address any particular issue,<br/>18 and I would report out with some regularity at<br/>19 cabinet issues that were happening in the city.<br/>20 And so he had asked me and the director of<br/>21 public safety to put together a set of<br/>22 recommendations to address the opiate crisis in<br/>23 the City of Cleveland.<br/>24 Q. Okay. Under "Rehabilitation" --<br/>25 it's a bit down the first page there -- it's</p> | <p style="text-align: right;">Page 232</p> <p>1 MR. PIFKO: Objection. Calls for<br/>2 speculation. Foundation.<br/>3 A. As we've heard from people that<br/>4 there are some people who are just so addicted,<br/>5 they have lost their ability to rationalize and<br/>6 their addiction has taken over and consumed<br/>7 their life.<br/>8 Q. But there are people who don't mind<br/>9 using drugs; is that fair to say?<br/>10 MR. PIFKO: Objection. Calls for<br/>11 speculation. Foundation. Asked and answered.<br/>12 A. I can't imagine that there's<br/>13 somebody who has a desire to not be addicted to<br/>14 a substance that they -- that is illegal for<br/>15 them to consume.<br/>16 Q. Can you explain then why only 15<br/>17 percent of addicts actually want out of the<br/>18 addiction according to your county's medical<br/>19 examiner?<br/>20 MR. PIFKO: Objection. Asked and<br/>21 answered. Foundation. Speculation.<br/>22 MR. SALIMBENE: I definitely didn't<br/>23 ask this one.<br/>24 MR. PIFKO: She answered it already.<br/>25 A. I am simply stating on this document</p>                                                                                        |
| <p style="text-align: right;">Page 231</p> <p>1 underlined, "Rehabilitation," and it says, last<br/>2 paragraph -- excuse me, last sentence of the<br/>3 first paragraph, "According to the county<br/>4 medical examiner, 15 percent of addicts actually<br/>5 want out of the addiction; of that, 10 percent<br/>6 actually make it clean one year later." Do you<br/>7 see where I read that?<br/>8 A. I do.<br/>9 Q. Does that mean that 85 percent of<br/>10 people using -- excuse me, of addicts don't want<br/>11 out of the addiction? Is that the flip side?<br/>12 MR. PIFKO: Objection. Foundation.<br/>13 Calls for speculation.<br/>14 A. That is not what is stated here in<br/>15 this document.<br/>16 Q. But what is stated is that only 15<br/>17 percent do, in fact, want out of addiction,<br/>18 true?<br/>19 MR. PIFKO: Same objections.<br/>20 A. I am stating what -- we got<br/>21 information from the county medical examiner's<br/>22 office and just repeating what they had given to<br/>23 me as information.<br/>24 Q. Do you agree that there are some<br/>25 individuals that don't want to stop using drugs?</p>                        | <p style="text-align: right;">Page 233</p> <p>1 that according to the county medical examiner --<br/>2 I'll repeat it back to you, I'll read what is<br/>3 written here -- "15 percent of addicts actually<br/>4 want out of the addiction, and of that, 10<br/>5 percent actually make it clean one year later."<br/>6 Q. Okay. So you have no idea why or<br/>7 how the other 85 percent of addicts feel?<br/>8 MR. PIFKO: Objection. Asked and<br/>9 answered.<br/>10 A. How they feel? No, I don't know<br/>11 that I know how they feel specifically.<br/>12 Q. Do you agree that there's an element<br/>13 of personal responsibility in addiction?<br/>14 MR. PIFKO: Objection. Foundation.<br/>15 Calls for speculation. Incomplete hypothetical.<br/>16 Calls for expert opinion.<br/>17 A. In what type of addiction?<br/>18 Q. Opioid addiction.<br/>19 MR. PIFKO: Same objections.<br/>20 A. From what we have gathered from a<br/>21 lot of information and meetings and data and<br/>22 discussions around this issue, there are<br/>23 pathways into addiction that have caused people<br/>24 to go to extremes to feed their addiction.<br/>25 Q. And my question was, do you believe</p> |

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1 that, based on your experience, there's an  
 2 element of personal responsibility in that cycle  
 3 of addiction?  
 4 MR. PIFKO: Objection. Foundation.  
 5 Calls for speculation. Incomplete hypothetical.  
 6 Calls for expert opinion.  
 7 A. I believe that in some -- to a large  
 8 degree, they don't have the capacity to -- to be  
 9 rational about this once they're addicted.  
 10 Q. Is that a no then? Is no the answer  
 11 to my question?  
 12 MR. PIFKO: Objection. Asked and  
 13 answered. You're harassing her. She gave an  
 14 answer.  
 15 A. I answered your question.  
 16 Q. I don't think you did. I said, is  
 17 there an element of personal responsibility in  
 18 addiction? And it could be yes and explain or a  
 19 no and explain.  
 20 MR. PIFKO: No. She can answer  
 21 however she wants.  
 22 MR. SALIMBENE: I move to strike her  
 23 answer as non-responsive.  
 24 A. I believe that once people are  
 25 addicted, they are, to a large degree, incapable

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1 of making that rational --  
 2 Q. How --  
 3 A. -- decision.  
 4 MR. PIFKO: Stop cutting her off.  
 5 MR. SALIMBENE: I didn't mean to cut  
 6 her off.  
 7 Q. How about the decision to use an  
 8 addictive substance, an illegal, addictive  
 9 substance? Strike that.  
 10 How about the decision to use an  
 11 illegal opioid in the first instance; do you  
 12 believe that there is an element of personal  
 13 responsibility with that?  
 14 MR. PIFKO: Objection. Foundation.  
 15 Incomplete hypothetical. Speculation. Calls  
 16 for expert opinion.  
 17 You can answer.  
 18 A. I believe that there's a pathway to  
 19 that, and --  
 20 Q. I didn't ask about a pathway.  
 21 A. -- leading up to the point where  
 22 they are seeking these -- these drugs to satiate  
 23 their addiction.  
 24 Q. I didn't ask about a pathway, so I  
 25 move to strike that as non-responsive, and we'll

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1 move on in the sake of time. We'll probably be  
 2 back here.  
 3 Now -- okay. So you're the top  
 4 public health official in Cleveland, true? We  
 5 established that?  
 6 A. Sure.  
 7 Q. Okay. And you come up -- you're  
 8 presenting these recommendations to the mayor,  
 9 right, so you have, on page 2 of this document  
 10 ending Bates 964, a list of recommendations. Do  
 11 you see where I am?  
 12 A. I do.  
 13 Q. And it's fair to say you could have  
 14 put anything in this list of recommendations  
 15 that you thought made sense? Is that fair?  
 16 A. Say your question again.  
 17 Q. Sure.  
 18 You could have put anything in this  
 19 list of recommendations that you thought made  
 20 sense in terms of, you know, improving the  
 21 public's health?  
 22 MR. PIFKO: Objection to the extent  
 23 the question assumes facts not in evidence.  
 24 A. This is to the chief of public  
 25 safety and to the director of community

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1 relations, a set of recommendations to present  
 2 to the mayor regarding this epidemic in this  
 3 city.  
 4 Q. I move to strike that as completely  
 5 non-responsive. My question was, you could have  
 6 put in this list of recommendations anything you  
 7 wanted that you thought made sense in, you know,  
 8 serving the purpose of what you were trying to  
 9 do here, true?  
 10 MR. PIFKO: Hold on. Calls for  
 11 speculation. Assumes facts not in evidence.  
 12 Q. Your answer was?  
 13 A. I could have.  
 14 Q. Okay. Number 3 here is "Part of the  
 15 money seized from drug arrests could support  
 16 treatment programs, prevention education or  
 17 nolozone programs." Do you see where I read  
 18 that?  
 19 A. Yes.  
 20 Q. Did that happen?  
 21 A. That has not happened, no.  
 22 Q. Okay. Is there anything in this  
 23 list of nine items here that addresses anything  
 24 to do with the conduct of the companies who  
 25 distribute opioid medications, pharmaceutical

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
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| <p style="text-align: right;">Page 238</p> <p>1 opioid medications?</p> <p>2 MR. PIFKO: Objection. The document</p> <p>3 speaks for itself. Objection to the extent that</p> <p>4 the question calls for a legal conclusion.</p> <p>5 A. The distributors are not named</p> <p>6 specifically in this set of recommendations.</p> <p>7 Q. Okay. Is there anything -- excuse</p> <p>8 me. Strike that.</p> <p>9 There is nothing in this set of</p> <p>10 recommendations that speaks to in any way</p> <p>11 suspicious order reporting; is that correct?</p> <p>12 MR. PIFKO: Again, the document</p> <p>13 speaks for itself and objection to the extent</p> <p>14 the question calls for a legal opinion.</p> <p>15 Q. You can answer.</p> <p>16 A. That is not mentioned specifically</p> <p>17 in this list of recommendations.</p> <p>18 Q. Do you recall -- you can put that</p> <p>19 aside.</p> <p>20 Do you recall signing onto a letter</p> <p>21 to the presidential transition team, yes or no?</p> <p>22 A. I do recall signing onto a couple</p> <p>23 letters to the transition team, yes.</p> <p>24 Q. So I'll mark this as Exhibit 11.</p> <p>25 - - - - -</p> | <p style="text-align: right;">Page 240</p> <p>1 A. So a big part of my work involves</p> <p>2 advocacy and I am part of a coalition of big</p> <p>3 cities. It's called The Big City Health</p> <p>4 Coalition. These individuals are and these</p> <p>5 individual departments are -- I believe all of</p> <p>6 them are members of the Big City Health</p> <p>7 Coalition. And this issue is so significant to</p> <p>8 us and to the cities where we work that we</p> <p>9 thought it very important to make sure that we</p> <p>10 submitted a letter to the transition team, and</p> <p>11 here it's addressed to Governor and</p> <p>12 Vice-President Elect Mike Pence, regarding this</p> <p>13 issue, and there's a number of -- number of</p> <p>14 issues contained therein.</p> <p>15 Q. Right. And one of the issues is, on</p> <p>16 page Bates ending 509, opioid addiction and</p> <p>17 overdose, correct?</p> <p>18 A. Yes, that is one of the</p> <p>19 subcategories. Yes.</p> <p>20 Q. And towards the bottom of that page</p> <p>21 there's a sentence that says, "We propose that</p> <p>22 the new administration," colon, and then there's</p> <p>23 a bulleted list of five items, true?</p> <p>24 A. On this page, yes.</p> <p>25 Q. Right. So this is a list that you</p> |
| <p style="text-align: right;">Page 239</p> <p>1 (Thereupon, Deposition Exhibit 11,</p> <p>2 Letter from Leana S. Wen, M.D. to</p> <p>3 Governor and Vice President-Elect</p> <p>4 Mike Pence, dated November 29, 2016,</p> <p>5 Beginning Bates Stamp</p> <p>6 CLEVE_000187508, was marked for</p> <p>7 purposes of identification.)</p> <p>8 - - - - -</p> <p>9 MR. PIFKO: Hold on.</p> <p>10 Q. It's Cleveland 187508, and it's a</p> <p>11 letter dated November 29th, 2016 to Governor and</p> <p>12 Vice-President Elect Mike Pence, and if you look</p> <p>13 at the page ending Bates 514, it says,</p> <p>14 sincere -- well, the page before it says,</p> <p>15 "Sincerely," and then it says, "On behalf of the</p> <p>16 following health commissioners representing 31</p> <p>17 million American citizens in 11 cities and</p> <p>18 counties," and there's a colon, and one of the</p> <p>19 names listed there on the left column, second</p> <p>20 from the bottom, is your name, true?</p> <p>21 A. True.</p> <p>22 Q. Okay. What was the purpose of this</p> <p>23 letter?</p> <p>24 MR. PIFKO: Take your time to review</p> <p>25 the letter.</p>             | <p style="text-align: right;">Page 241</p> <p>1 put together for proposals that the new</p> <p>2 administration consider, fair?</p> <p>3 MR. PIFKO: Objection. Assumes</p> <p>4 facts not in evidence. Mischaracterizes the</p> <p>5 document and the record.</p> <p>6 A. I did not write this document.</p> <p>7 Q. You signed onto the document,</p> <p>8 correct?</p> <p>9 A. Signed onto it.</p> <p>10 Q. What was your understanding of what</p> <p>11 this section was designed to do?</p> <p>12 MR. PIFKO: Objection. Foundation.</p> <p>13 A. Again, a big part of my job is</p> <p>14 advocacy and bringing resources to issues in our</p> <p>15 community. One way we do that is we advocate to</p> <p>16 policy makers on a federal level, and this is</p> <p>17 one example of that.</p> <p>18 Q. Okay. Is it correct that there is</p> <p>19 nothing in these five bullets that relates to</p> <p>20 the conduct by distributor defendants who have</p> <p>21 been sued by the City of Cleveland in this case?</p> <p>22 MR. PIFKO: Objection. The document</p> <p>23 speaks for itself and objection to the extent</p> <p>24 the question calls for a legal opinion.</p> <p>25 A. Distributors are not mentioned in</p>                                                                 |

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| <p style="text-align: right;">Page 242</p> <p>1 this set of proposals on page 2.</p> <p>2 Q. Are you aware of any criminal act</p> <p>3 related to drug diversion that were committed by</p> <p>4 the distributor defendants who have been sued by</p> <p>5 the City of Cleveland in this case?</p> <p>6 MR. PIFKO: Aside from your</p> <p>7 communications with counsel, you can answer.</p> <p>8 A. I am not aware.</p> <p>9 Q. How about criminal acts related to</p> <p>10 improper use of prescription opioids by other</p> <p>11 individuals, such as street drug dealers; are</p> <p>12 you aware of criminal activities like that?</p> <p>13 MR. PIFKO: Again, aside from your</p> <p>14 communications with counsel, you can answer.</p> <p>15 A. Repeat your question.</p> <p>16 Q. Sure.</p> <p>17 Are you aware that there are people</p> <p>18 breaking the law with respect to prescription</p> <p>19 opioids, such as street dealers who are selling</p> <p>20 prescription-only pills to individuals who have</p> <p>21 no valid legal prescription?</p> <p>22 MR. PIFKO: Objection to the extent</p> <p>23 the question assumes facts not in evidence.</p> <p>24 A. I -- I know that we've heard</p> <p>25 anecdotally that there are -- there is some sale</p>              | <p style="text-align: right;">Page 244</p> <p>1 attorney-client privilege. Aside from</p> <p>2 communications with counsel, you can answer.</p> <p>3 MR. SALIMBENE: When your objections</p> <p>4 are longer than my question, it's probably</p> <p>5 inappropriate, just as a rule of thumb, but --</p> <p>6 MR. PIFKO: Well, when you ask bad</p> <p>7 questions, I'm going to have plenty of</p> <p>8 objections to make.</p> <p>9 MR. SALIMBENE: You have all day.</p> <p>10 Q. You can answer.</p> <p>11 A. You'll have to repeat the question.</p> <p>12 MR. SALIMBENE: Can you read it</p> <p>13 back?</p> <p>14 (Record read.)</p> <p>15 Q. And "that sort of conduct" was</p> <p>16 criminal sale of drugs?</p> <p>17 MR. PIFKO: Again, objection to the</p> <p>18 extent the question calls for a legal</p> <p>19 conclusion, legal opinions.</p> <p>20 MR. SALIMBENE: You have the same</p> <p>21 objection.</p> <p>22 Q. You can answer.</p> <p>23 MR. PIFKO: Well, no. You added to</p> <p>24 the question.</p> <p>25 Q. You can answer.</p>                                                                                                     |
| <p style="text-align: right;">Page 243</p> <p>1 of prescription pills illegally, and this is</p> <p>2 based on, again, hearing testimony at meetings</p> <p>3 and individuals that we've talked about in terms</p> <p>4 of -- came up in a lot of different discussions</p> <p>5 around breaking and entering and how bathrooms</p> <p>6 and medicine cabinets had been pilfered and</p> <p>7 pills had been taken and then sold on the -- on</p> <p>8 the streets, all just what has come up again in</p> <p>9 the many meetings and many conversations that</p> <p>10 I've had about this issue.</p> <p>11 Q. You've had conversations with law</p> <p>12 enforcement, true?</p> <p>13 A. Law enforcement, sure.</p> <p>14 Q. You've had conversations where law</p> <p>15 enforcement tells you that they've been</p> <p>16 arresting people for selling drugs, true?</p> <p>17 A. Correct.</p> <p>18 Q. Okay. And is it also true that you</p> <p>19 have not sued anybody that participates in that</p> <p>20 sort of conduct in this lawsuit?</p> <p>21 MR. PIFKO: Objection to the extent</p> <p>22 the question mischaracterizes the record and</p> <p>23 calls for a legal conclusion, legal opinion.</p> <p>24 The lawsuit speaks for itself.</p> <p>25 You can answer. Oh, and</p> | <p style="text-align: right;">Page 245</p> <p>1 A. I do not believe that those</p> <p>2 individuals are included in this case.</p> <p>3 Q. As you sit here today, are you able</p> <p>4 to link any expense you allege that your</p> <p>5 department incurred to the conduct of anybody,</p> <p>6 any company who distributed lawfully</p> <p>7 prescription opioid medications?</p> <p>8 MR. PIFKO: Objection. Foundation.</p> <p>9 Calls for expert opinion. Calls for a legal</p> <p>10 conclusion, legal opinion. You can answer.</p> <p>11 Speculation.</p> <p>12 Q. You can answer.</p> <p>13 A. I cannot draw that conclusion</p> <p>14 myself.</p> <p>15 Q. I'm sorry. What was the answer?</p> <p>16 A. I cannot -- I cannot make -- I</p> <p>17 cannot answer that question.</p> <p>18 Q. Why not?</p> <p>19 A. I cannot answer that question.</p> <p>20 Q. Have you ever attempted to make that</p> <p>21 determination prior to today?</p> <p>22 A. Make what determination?</p> <p>23 Q. What amount or what proportion of</p> <p>24 the damages that you say -- you claim in this</p> <p>25 lawsuit your department suffered are due to the</p> |

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| <p style="text-align: right;">Page 246</p> <p>1 conduct of the distributor defendants in this<br/>2 lawsuit.<br/>3 MR. PIFKO: Hold on. What's your<br/>4 question?<br/>5 MR. SALIMBENE: I just asked it.<br/>6 A. I don't understand your question.<br/>7 MR. PIFKO: Well, if you literally<br/>8 read the transcript here, it's just a statement<br/>9 from you. It's not a question.<br/>10 MR. SALIMBENE: What is it?<br/>11 MR. PIFKO: It says, "What amount or<br/>12 proportion of the damages that you say you claim<br/>13 in this lawsuit your department suffered are due<br/>14 to the conduct of distributors in this lawsuit."<br/>15 Q. That's a question. What proportion<br/>16 of the --<br/>17 MR. PIFKO: She just answered that<br/>18 question.<br/>19 Q. Do you know the answer to that<br/>20 question?<br/>21 MR. PIFKO: Objection. Prior<br/>22 objections. Calls for expert opinion, legal<br/>23 conclusion, foundation.<br/>24 Q. Do you know the answer to that<br/>25 question?</p>                                                                                                                                                                                 | <p style="text-align: right;">Page 248</p> <p>1 been caused by prescription opioids?<br/>2 MR. PIFKO: Objection. Foundation.<br/>3 A. I don't know that I can answer that<br/>4 question.<br/>5 Q. Why not?<br/>6 A. I don't have the data in front of<br/>7 me.<br/>8 MR. SALIMBENE: Let's mark this. I<br/>9 had them make copies. There's two black and<br/>10 white copies and one color copy that you can<br/>11 look at. There's some color coding. Sorry. I<br/>12 didn't mark that.<br/>13 - - - - -<br/>14 (Thereupon, Deposition Exhibit 12,<br/>15 Ohio Department of Health 2016 Ohio<br/>16 Drug Overdose Data: General<br/>17 Findings, was marked for purposes of<br/>18 identification.)<br/>19 - - - - -<br/>20 Q. What I marked as Exhibit 12 is a<br/>21 2016 Ohio drug overdose data general findings<br/>22 document, and it has the Ohio Department of<br/>23 Health at the top. Do you see that document?<br/>24 A. I do.<br/>25 Q. Have you ever seen this document</p>                                                                                                    |
| <p style="text-align: right;">Page 247</p> <p>1 A. My department and the city has had<br/>2 to respond to this issue and we are way<br/>3 under-resourced to do that, and we -- we are<br/>4 dealing with a crisis in this community of<br/>5 addicts and the impact of all of that, and I<br/>6 can't put a dollar figure on it and I can't be<br/>7 that specific to an actual amount.<br/>8 Q. I move to strike everything before<br/>9 "I can't put a dollar figure on it."<br/>10 Do you agree that since you took<br/>11 over the Department of Public Health in 2016,<br/>12 that illegal drugs have been a bigger problem in<br/>13 Cleveland when you compare them to prescription<br/>14 opioids?<br/>15 MR. PIFKO: Hold on a second.<br/>16 You can answer the question. You<br/>17 are speaking fast.<br/>18 MR. SALIMBENE: I speak fast; that I<br/>19 will agree to. Sorry.<br/>20 A. I believe that illegal drugs are a<br/>21 problem because pathways towards them have<br/>22 contributed to this issue in this community.<br/>23 Q. Do you believe that in 2016,<br/>24 starting the year you took over, more deaths<br/>25 have been caused by illegal opioids than have</p> | <p style="text-align: right;">Page 249</p> <p>1 before?<br/>2 A. I see a lot of documents.<br/>3 Q. Do you know one way or the other?<br/>4 A. I can't say.<br/>5 Q. That's okay.<br/>6 I believe earlier you testified,<br/>7 when you were being questioned by counsel for<br/>8 the manufacturer defendants, that the number of<br/>9 pills coming into the county -- excuse me, into<br/>10 your city had gone up. Do you remember that<br/>11 testimony?<br/>12 MR. PIFKO: Objection.<br/>13 Mischaracterizes the record. Assumes facts not<br/>14 in evidence.<br/>15 Q. Do you remember that testimony?<br/>16 A. It's been a long day.<br/>17 Q. Well, I'm going to give you a chance<br/>18 to answer it again. Do you believe, as you sit<br/>19 here right now, that the number of opioid<br/>20 prescription pills that have been distributed<br/>21 into Cleveland has increased since 2011?<br/>22 A. I know that there has -- based on<br/>23 information, has been an increase. I don't know<br/>24 for sure the actual date that we have that<br/>25 information back from --</p> |

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| <p style="text-align: right;">Page 250</p> <p>1 Q. How about with respect to the State<br/>2 of Ohio; has the number of opioid -- excuse me,<br/>3 prescription opioids gone up or down since 2011?<br/>4 MR. PIFKO: Objection. Foundation.<br/>5 Calls for speculation.<br/>6 Q. Do you know?<br/>7 A. It is my recollection that it has<br/>8 been on the rise.<br/>9 Q. Okay. Can you look at page 4 of the<br/>10 document, figure 6, "Opioid solid doses<br/>11 dispensed to Ohio patients by year." Do you see<br/>12 that chart? In 2011 the Y axis is the number of<br/>13 solid doses in millions, and in 2011 it says<br/>14 782. Do you see where I read that?<br/>15 A. I do.<br/>16 Q. And in 2016 it says 631. Do you see<br/>17 where I read that?<br/>18 A. Yes.<br/>19 Q. The number goes down, true?<br/>20 MR. PIFKO: Objection. The document<br/>21 speaks for itself. Calls for foundation.<br/>22 Q. Is 631 lower than 782?<br/>23 A. I am not a pharmacist so I don't<br/>24 know what a solid dose is.<br/>25 Q. Is 631 lower than 782?</p> | <p style="text-align: right;">Page 252</p> <p>1 A. Strictly as a number, sure.<br/>2 Q. If you look at the figure 6 on page<br/>3 4 of this document, is it your testimony, as the<br/>4 top public health official in Cleveland, you are<br/>5 unable to interpret the trend of opioid solid<br/>6 doses over time dispensed to Ohio patients?<br/>7 MR. PIFKO: Objection.<br/>8 Argumentative.<br/>9 A. As I've said before, I'm not a<br/>10 pharmacist so I don't know what a solid dose is<br/>11 and I don't know if this is the totality of all<br/>12 opiates being dispensed in the state.<br/>13 Q. So you don't know how to interpret<br/>14 that chart; is that fair to say?<br/>15 A. As I said before, I'm not a<br/>16 pharmacist so I don't know what a solid dose is.<br/>17 Q. How about you look at page 2,<br/>18 please? And this is -- figure 2 is percentage<br/>19 of unintentional drug overdose deaths involving<br/>20 selected drugs by year 2010 to 2016. Do you see<br/>21 where I am?<br/>22 A. Up at the top, yes.<br/>23 Q. What has happened to the percentage<br/>24 of deaths attributable to prescription opioids<br/>25 since 2011?</p> |
| <p style="text-align: right;">Page 251</p> <p>1 MR. PIFKO: Objection.<br/>2 Argumentative. Harassing.<br/>3 A. I'm not a pharmacist and I don't<br/>4 know what a solid dose is.<br/>5 Q. Is 631 lower than 732?<br/>6 MR. PIFKO: You're harassing her.<br/>7 You're trying to trick her. She's answered the<br/>8 question about this chart that you're asking<br/>9 her --<br/>10 MR. SALIMBENE: No.<br/>11 MR. PIFKO: If you just want to<br/>12 know --<br/>13 MR. SALIMBENE: I don't want to know<br/>14 anything from you. I just don't.<br/>15 MR. PIFKO: I want to be clear about<br/>16 the record here. Are you just asking her a<br/>17 simple question is the number 631 lower than 732<br/>18 or are you asking about this document?<br/>19 MR. SALIMBENE: Sir, I'm asking her<br/>20 exactly what I asked her. That's what I'm<br/>21 asking her, exactly what I said.<br/>22 MR. PIFKO: He's asking you a simple<br/>23 number question. You don't need the document to<br/>24 answer his question.<br/>25 Q. Is 631 lower than 782?</p>             | <p style="text-align: right;">Page 253</p> <p>1 MR. PIFKO: Objection. The document<br/>2 speaks for itself. Foundation. Calls for<br/>3 speculation.<br/>4 A. I'm sorry. Ask your question again.<br/>5 Q. Sure. I'll ask it a different way.<br/>6 The percentage of overall -- excuse<br/>7 me, the percentage of all overdose deaths<br/>8 attributable to prescription opioids according<br/>9 to this chart has declined every year since<br/>10 2011, true?<br/>11 MR. PIFKO: Objection. Foundation.<br/>12 Document speaks for itself.<br/>13 A. This is what's purported on this<br/>14 report.<br/>15 Q. Do you have any basis to dispute the<br/>16 accuracy of this report?<br/>17 MR. PIFKO: Objection. Foundation.<br/>18 Speculation. Expert opinion.<br/>19 A. There's just one source indicated<br/>20 here, so it is data reported just on -- from one<br/>21 source, and based on just this report from this<br/>22 one source, while not entirely true, it does<br/>23 look -- it does appear that there is a<br/>24 reduction, yes.<br/>25 MR. PIFKO: We are taking a break</p>                                                                           |

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| <p style="text-align: right;">Page 254</p> <p>1 right now.</p> <p>2 MR. SALIMBENE: Okay.</p> <p>3 THE VIDEOGRAPHER: Going off the</p> <p>4 record. The time is 4:37.</p> <p>5 (Recess had.)</p> <p>6 THE VIDEOGRAPHER: Back on the</p> <p>7 record. The time is 4:58.</p> <p>8 BY MR. SALIMBENE:</p> <p>9 Q. Director Gordon, one more question</p> <p>10 about Exhibit 12, which I think is in that pile</p> <p>11 right there.</p> <p>12 Again, on page 2, if you look at</p> <p>13 figure 2, which indicates the percentage of</p> <p>14 unintentional drug overdose deaths involved with</p> <p>15 selected drugs by year, if you look at for 2016</p> <p>16 the orange column to the far right, if you</p> <p>17 compare cocaine to prescription opioids, would</p> <p>18 you agree that the percentage of unintentional</p> <p>19 drug overdose deaths involving cocaine is higher</p> <p>20 than the percentage involving prescription</p> <p>21 opioids?</p> <p>22 MR. PIFKO: Objection. The document</p> <p>23 speaks for itself. Foundation.</p> <p>24 You can answer.</p> <p>25 A. Well, again, considering the source</p> | <p style="text-align: right;">Page 256</p> <p>1 Q. Who is Ms. Rush?</p> <p>2 A. Jana Rush was an employee of the</p> <p>3 Cleveland Department of Public Health.</p> <p>4 Q. And you wanted her to distribute</p> <p>5 this to her team, true?</p> <p>6 A. That is what I say here in this</p> <p>7 e-mail.</p> <p>8 Q. Would you ask her to distribute</p> <p>9 information to her team that you did not think</p> <p>10 was accurate?</p> <p>11 A. I would ask her to distribute to her</p> <p>12 team information that comes to me from the Ohio</p> <p>13 Department of Health. I'm still new at this</p> <p>14 point so I'm forwarding information. I don't</p> <p>15 know if they are receiving it or not.</p> <p>16 Q. Okay. So is it your testimony,</p> <p>17 then, this information might be accurate, it</p> <p>18 might not be accurate, and you're asking her to</p> <p>19 forward it out to her team?</p> <p>20 A. It is information directly from the</p> <p>21 Ohio Department of Health. It is one of the</p> <p>22 many listservs that I am on, and I am forwarding</p> <p>23 it to -- to the staff person and asking her to</p> <p>24 distribute it to her team.</p> <p>25 Q. Okay. On page 2 of this document</p> |
| <p style="text-align: right;">Page 255</p> <p>1 and the -- based on the actual -- the time of</p> <p>2 death, that is what this specific report does</p> <p>3 reflect in the orange column.</p> <p>4 Q. Are you aware of any data that</p> <p>5 suggests what's represented there in figure 2,</p> <p>6 which I just asked you to describe, is not</p> <p>7 accurate?</p> <p>8 A. I don't -- I don't have -- I don't</p> <p>9 know.</p> <p>10 - - - - -</p> <p>11 (Thereupon, Deposition Exhibit 13,</p> <p>12 E-Mail from Merle Gordon to Jana</p> <p>13 Rush, dated August 25, 2016,</p> <p>14 Beginning Bates Stamp</p> <p>15 CLEVE_000191543, was marked for</p> <p>16 purposes of identification.)</p> <p>17 - - - - -</p> <p>18 Q. Okay. Can you look at what I'm</p> <p>19 handing you that has been marked as Exhibit 13?</p> <p>20 And that is a document -- it's an e-mail from</p> <p>21 you and a Bates ending CLEVE 191543. At the</p> <p>22 beginning of this document it is an e-mail,</p> <p>23 correct, from you to Jana Rush? Do you see</p> <p>24 where I am?</p> <p>25 A. I do.</p>                               | <p style="text-align: right;">Page 257</p> <p>1 Bates ending 544, there's a quote in that first</p> <p>2 paragraph towards the bottom. It says, "Also,</p> <p>3 the percentage of prescription opioid-related</p> <p>4 deaths compared to all unintentional overdose</p> <p>5 deaths declined in Ohio for the fourth straight</p> <p>6 year and the number of these deaths are leveling</p> <p>7 off." Do you see where I read that?</p> <p>8 A. I do.</p> <p>9 Q. Do you have any basis to disagree</p> <p>10 with the conclusions stated there?</p> <p>11 MR. PIFKO: Objection. Foundation.</p> <p>12 Calls for speculation.</p> <p>13 A. It's a quote in this e-mail from the</p> <p>14 Ohio Department of Health.</p> <p>15 Q. That's correct.</p> <p>16 Do you have any basis to dispute or</p> <p>17 do you disagree with in any way what is stated</p> <p>18 in that quote?</p> <p>19 MR. PIFKO: Objection. Foundation.</p> <p>20 Calls for speculation.</p> <p>21 A. I have no basis one way or the</p> <p>22 other.</p> <p>23 Q. Okay. If you look at the first page</p> <p>24 of this document, Bates ending 543, it says --</p> <p>25 there's -- it says, "Mark Hurst, medical</p>                                         |

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| <p style="text-align: right;">Page 258</p> <p>1 director of the Ohio Department of Mental Health<br/>2 and Addiction Services." Do you know Dr. Hurst<br/>3 personally -- professionally? Sorry.<br/>4 A. I do not.<br/>5 Q. No.<br/>6 Well, let me ask you this: Before<br/>7 you asked Jana to forward this, do you recall<br/>8 whether you would have read this and reviewed it<br/>9 first yourself?<br/>10 A. I receive a lot of e-mails. I can't<br/>11 tell you whether or not I read the entirety of<br/>12 this e-mail or not. This is August of 2016,<br/>13 almost two years ago.<br/>14 Q. That's fair.<br/>15 Was it your standard practice to<br/>16 read newsletters from the Ohio Department of<br/>17 Health before you asked team members to forward<br/>18 them?<br/>19 A. Not necessarily. I was forwarding<br/>20 them, again, as part of these listservs and<br/>21 wanting to make sure my staff had information as<br/>22 it was coming out of the Ohio Department of<br/>23 Health. That is regular practice.<br/>24 MR. SALIMBENE: Can we hop off the<br/>25 record for one second?</p> | <p style="text-align: right;">Page 260</p> <p>1 and Brent Styer, and the Bates is Cleveland<br/>2 188213. Do you see where I am?<br/>3 A. I do.<br/>4 Q. And who is Mr. Gretick?<br/>5 A. It says on here David Gretick was<br/>6 the program director for the Office of Mental<br/>7 Health and Substance Abuse for the Cleveland<br/>8 Department of Public Health.<br/>9 Q. Do you know how long he has been<br/>10 with Cleveland in that role?<br/>11 A. I don't know exactly how long he's<br/>12 been with Cleveland, no.<br/>13 Q. And he says, "Hello again. As<br/>14 Dr. Murthy's discussion to the audience at grand<br/>15 rounds will include appropriate opioid<br/>16 prescribing practices, I'm also attaching<br/>17 information on the Ohio Automated Rx Reporting<br/>18 System (OARRS)." Do you see where I read that?<br/>19 A. Yes.<br/>20 Q. Is Dr. Murthy -- is that the same<br/>21 Dr. Murthy who was the former Surgeon General;<br/>22 do you know?<br/>23 A. I cannot say for sure.<br/>24 Q. Okay. You did testify earlier you<br/>25 attended a presentation with that Dr. Murthy,</p> |
| <p style="text-align: right;">Page 259</p> <p>1 THE VIDEOGRAPHER: Off the record,<br/>2 5:04.<br/>3 (Short recess had.)<br/>4 THE VIDEOGRAPHER: Back on the<br/>5 record, 5:04.<br/>6 BY MR. SALIMBENE:<br/>7 Q. Director Gordon, are you familiar<br/>8 with the OARRS database, O-A-R-R-S?<br/>9 A. I have some familiarity with the<br/>10 database, yes.<br/>11 Q. And can you describe for me what<br/>12 your familiarity consists of, what your<br/>13 understanding of that database is?<br/>14 Oh, sorry. I didn't mark that.<br/>15 - - - - -<br/>16 (Thereupon, Deposition Exhibit 14,<br/>17 E-Mail from David Gretick to Merle<br/>18 Gordon, dated July 11, 2016,<br/>19 Bates-Stamped CLEVE_000188213, was<br/>20 marked for purposes of<br/>21 identification.)<br/>22 - - - - -<br/>23 Q. I've marked as Exhibit 14 an e-mail<br/>24 from David Gretick to you, Director Gordon,<br/>25 Kathie Rosen -- Rothenberg, excuse me, Jana Rush</p>                                                                                                                                                      | <p style="text-align: right;">Page 261</p> <p>1 true?<br/>2 A. I did go to a meeting when he was<br/>3 here in town, yes.<br/>4 Q. But you don't recall if this is the<br/>5 same thing; is that fair?<br/>6 A. I can't say for sure. It's an old<br/>7 e-mail.<br/>8 Q. Sure.<br/>9 Do you recall -- well, let me ask it<br/>10 this way: Did you attend the grand rounds that<br/>11 Dr. Murthy gave on that topic? Do you recall<br/>12 whether you were there?<br/>13 MR. PIFKO: Objection. Vague.<br/>14 A. I cannot recall if I attended that<br/>15 grand rounds. I attended a pre-meeting with a<br/>16 group of stakeholders and experts and<br/>17 individuals with the Surgeon General.<br/>18 Q. Had you heard of OARRS prior to the<br/>19 time you received this e-mail from Mr. Gretick?<br/>20 A. I don't believe so.<br/>21 Q. Okay. Did you review this e-mail<br/>22 from Mr. Gretick when you received it; do you<br/>23 recall?<br/>24 A. I do not recall.<br/>25 Q. Do you know whether the city,</p>                                                                                            |

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| <p style="text-align: right;">Page 262</p> <p>1 Cleveland's Department of Public Health, was<br/>2 utilizing information obtained from the OARRS<br/>3 database at the time you took over in your role<br/>4 as director in 2016?<br/>5 A. I do not recall.<br/>6 Q. Does the department currently<br/>7 utilize data obtained from the OARRS database<br/>8 for any purpose as we sit here today?<br/>9 A. I do not know.<br/>10 Q. Can you say one way or the other<br/>11 whether the Department of Public Health has ever<br/>12 used or attempted to leverage or review data<br/>13 contained in the OARRS database?<br/>14 MR. PIFKO: Objection. Vague.<br/>15 A. I do recall that this was a part of<br/>16 the application from -- for grant funding from<br/>17 the Department of Justice for a program that we<br/>18 discussed earlier today, the CORAP application.<br/>19 There was an anticipation that if we were<br/>20 funded, that we would be able to access this<br/>21 information.<br/>22 Q. Have you ever made -- let me ask it<br/>23 this way: You testified that you're not, in<br/>24 fact, using this OARRS information in any way<br/>25 today, true?</p> | <p style="text-align: right;">Page 264</p> <p>1 parens, known as the Ohio Automated Rx Reporting<br/>2 System (OARRS). Established in 2006, OARRS<br/>3 collects information on all outpatient<br/>4 prescriptions for controlled substances<br/>5 dispensed by Ohio licensed pharmacies and<br/>6 personally furnished by licensed prescribers in<br/>7 Ohio. Drug wholesalers are also required to<br/>8 submit information on all controlled substances<br/>9 sold to an Ohio licensed pharmacy or a<br/>10 prescriber. The data is reported every 24 hours<br/>11 and is maintained in a secure database." Did I<br/>12 read that correctly?<br/>13 A. You did.<br/>14 Q. And that is information that is<br/>15 available in Ohio, true?<br/>16 MR. PIFKO: Objection. Foundation.<br/>17 Calls for speculation.<br/>18 A. Well, just above it, it says, "The<br/>19 following description is copied verbatim from<br/>20 the OARRS website," so I believe that what you<br/>21 just read is what was copied verbatim from the<br/>22 OARRS website.<br/>23 Q. OARRS is a database available to<br/>24 you, true, as the Department of Health director,<br/>25 that you could review and it would provide you</p> |
| <p style="text-align: right;">Page 263</p> <p>1 A. I don't know that we are.<br/>2 Q. Okay. Have you ever asked anybody<br/>3 at OARRS to gain access to their information,<br/>4 independent of that grant you just mentioned?<br/>5 A. Independent of that grant?<br/>6 Q. Yes.<br/>7 A. I have no recollection.<br/>8 Q. You testified earlier that you look<br/>9 at a number of databases and I believe you said<br/>10 we like to look at all the data available to us.<br/>11 Do you recall giving testimony like that?<br/>12 A. As the director of the Cleveland<br/>13 Department of Public Health, we look at as much<br/>14 data as we can to assess and understand the<br/>15 issues facing our city.<br/>16 Q. Including prescription drug abuse,<br/>17 true?<br/>18 MR. PIFKO: Objection. Vague.<br/>19 A. If we can.<br/>20 Q. In that first -- second paragraph,<br/>21 after the introduction there's quotes, blocked,<br/>22 it's indented, it says, "To address the growing<br/>23 misuse and diversion of prescription drugs, the<br/>24 State of Ohio Board of Pharmacy created Ohio's<br/>25 Prescription Drug Monitoring Program, PDMP in</p>                 | <p style="text-align: right;">Page 265</p> <p>1 information about the amount of prescription<br/>2 opioids being used in Ohio; isn't that fair?<br/>3 MR. PIFKO: Objection. Assumes<br/>4 facts not in evidence. Mischaracterizes the<br/>5 record. Calls for speculation. Foundation.<br/>6 A. I do not know if this is available<br/>7 to us. There are a number of databases that<br/>8 require certain licenses of individuals to<br/>9 access, and sometimes there's costs associated<br/>10 to them and sometimes there are other<br/>11 requirements. I don't know where this falls.<br/>12 Q. Okay. With respect to OARRS, have<br/>13 you made an inquiry as to where it falls in that<br/>14 spectrum you just described with cost and access<br/>15 issues? Have you ever reached out to somebody<br/>16 and said, hey, how can we get our hands on this<br/>17 OARRS data?<br/>18 A. I don't have recollection that I did<br/>19 that specifically.<br/>20 Q. Okay. It says, second paragraph,<br/>21 "OARRS is a tool that can be used to address<br/>22 prescription drug diversion and abuse." Do you<br/>23 see where I read that?<br/>24 A. Yes.<br/>25 Q. And then it goes on to say, "It</p>       |

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| <p style="text-align: right;">Page 266</p> <p>1 serves multiple functions including: Patient<br/>2 care tool, drug epidemic early warning system."<br/>3 Do you see where I read that?<br/>4 A. Yes.<br/>5 Q. It's true that that's what your<br/>6 department does as well, that -- what I should<br/>7 say is, is it correct that the Public Health<br/>8 Department in Ohio is designed in part to<br/>9 prevent epidemics?<br/>10 A. That is what we strive to do with<br/>11 the limited resources we have and the staff<br/>12 available to do it.<br/>13 Q. Right. And there was this program<br/>14 in Ohio that was designed to do the same thing,<br/>15 correct, serve as a drug epidemic early warning<br/>16 system, true?<br/>17 MR. PIFKO: Objection. Foundation.<br/>18 Calls for speculation. Assumes facts not in<br/>19 evidence.<br/>20 You can answer.<br/>21 A. This is copied from the OARRS<br/>22 website and it is describing apparently what it<br/>23 does and the information that it has.<br/>24 Q. And it's fair to say that the<br/>25 information it has lines up almost verbatim with</p>                                                                          | <p style="text-align: right;">Page 268</p> <p>1 website is it is a drug epidemic early warning<br/>2 system, correct?<br/>3 MR. PIFKO: Objection. Foundation.<br/>4 Speculation.<br/>5 A. If this is copied verbatim as stated<br/>6 in this e-mail, then those are the words that<br/>7 are here.<br/>8 Q. And one of the stated objectives for<br/>9 your Department of Public Health is to prevent<br/>10 epidemics, true?<br/>11 A. We also seek to stop all HIV cases.<br/>12 We try to work on that as well as --<br/>13 Q. I move to strike as non-responsive.<br/>14 A. -- STIs and avoid all infant<br/>15 mortality cases.<br/>16 Q. Are you having trouble understanding<br/>17 my questions?<br/>18 MR. PIFKO: She is, and she's trying<br/>19 to answer your question and you're interrupting<br/>20 her, so continue as much as you need to to<br/>21 answer his question. I think her point is<br/>22 clear. It's clear to me.<br/>23 Q. My question was, is it true that one<br/>24 of your stated goals, the Department of Public<br/>25 Health that is, is to prevent epidemics? Is</p>                                   |
| <p style="text-align: right;">Page 267</p> <p>1 one of the goals of your department, which is to<br/>2 prevent epidemics, true?<br/>3 MR. PIFKO: Objection. Foundation.<br/>4 Speculation. Assumes facts not in evidence.<br/>5 You can answer.<br/>6 A. There are a number of databases that<br/>7 are available nationwide and here in Ohio.<br/>8 Again, I can't say whether or not we would have<br/>9 had access to it either with the credentials<br/>10 that we had on staff or -- I don't know if this<br/>11 is a service that is -- has a fee associated<br/>12 with it. There are a lot of databases that --<br/>13 some we have access to and some we do not.<br/>14 MR. SALIMBENE: I move to strike<br/>15 that as non-responsive.<br/>16 Can you read back my question? I'm<br/>17 asking about this specific database, OARRS.<br/>18 (Record read.)<br/>19 MR. PIFKO: Even the court reporter<br/>20 has trouble understanding your questions.<br/>21 MR. SALIMBENE: I think she just<br/>22 took down a word incorrectly, but thank you.<br/>23 A. I don't understand your question.<br/>24 Q. What I'm saying is, one of the<br/>25 stated uses of OARRS according to the OARRS</p> | <p style="text-align: right;">Page 269</p> <p>1 that a stated goal for the Department of Public<br/>2 Health?<br/>3 A. It is a goal, yes.<br/>4 Q. Okay. Thank you.<br/>5 And you asked to use this OARRS data<br/>6 in a recent grant, correct?<br/>7 A. It was included in the -- some part<br/>8 of it was included in the application to the<br/>9 Department of Justice for that CORAP grant, yes.<br/>10 Q. Would you have asked to access OARRS<br/>11 data if you didn't think the data would be<br/>12 useful to you?<br/>13 MR. PIFKO: Objection. Speculation.<br/>14 Foundation. Assumes facts not in evidence.<br/>15 A. I don't understand your question.<br/>16 Q. You asked for access --<br/>17 A. Please don't point at me.<br/>18 Q. I'm not. I'm sorry. This is just<br/>19 the way I talk. Let the record reflect I have<br/>20 my fingers pinched like I'm holding a pencil.<br/>21 MR. PIFKO: You are pointing at her.<br/>22 Q. Director Gordon, my question is --<br/>23 MR. PIFKO: She's the director of<br/>24 the public health department of the city. You<br/>25 could give her a little bit more respect.</p> |

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| <p style="text-align: right;">Page 270</p> <p>1 MR. SALIMBENE: I said to her --</p> <p>2 MR. PIFKO: No. It's your tone.</p> <p>3 MR. BOEHM: The tone has been</p> <p>4 perfectly fine. Nobody was pointing.</p> <p>5 MR. PIFKO: He is pointing. How</p> <p>6 many people in this room, if you're going to say</p> <p>7 that -- he is pointing at her. He is pointing.</p> <p>8 Does anyone else -- you said he's not pointing</p> <p>9 so I want to be clear here.</p> <p>10 MR. NAEEM: Is this an anti-pointing</p> <p>11 room?</p> <p>12 MR. PIFKO: No, but it's attacking</p> <p>13 the witness and it's inappropriate.</p> <p>14 THE COURT REPORTER: I cannot take</p> <p>15 down everyone talking at the same time.</p> <p>16 MR. BOEHM: You guys are playing</p> <p>17 games. Let's keep going. And I pinched my</p> <p>18 finger together.</p> <p>19 MR. PIFKO: We're not playing games.</p> <p>20 I don't have an issue with you pointing at me.</p> <p>21 You can point at me all day long.</p> <p>22 Q. Is it true that you requested access</p> <p>23 to OARRS data because you thought that data</p> <p>24 could be useful to you as the director of public</p> <p>25 health?</p>                        | <p style="text-align: right;">Page 272</p> <p>1 A. I don't recall who exactly Cameron</p> <p>2 McNamee is.</p> <p>3 Q. Okay. It says, "They are applying</p> <p>4 for category 5, the Prescription Monitoring and</p> <p>5 Implementation Program. So this should not</p> <p>6 conflict. They would be happy to write a letter</p> <p>7 of support but want to know what kind of data we</p> <p>8 would need from OARRS. Apparently past grants</p> <p>9 expected to receive data from OARRS but they</p> <p>10 were not notified nor asked to write letters of</p> <p>11 support, and on occasion, were unable to meet</p> <p>12 the expectations of the grant." Do you see</p> <p>13 where I read that?</p> <p>14 A. I do.</p> <p>15 Q. Does that indicate to you that in</p> <p>16 the past your department wanted to receive data</p> <p>17 from OARRS but OARRS was never notified or asked</p> <p>18 to write letters of support?</p> <p>19 MR. PIFKO: Objection. Calls for</p> <p>20 speculation. Foundation.</p> <p>21 A. It does not say that it was my</p> <p>22 department specifically that they had a concern</p> <p>23 about, because if you read the next sentence, it</p> <p>24 says he just gave this as a general statement,</p> <p>25 not that it pertained to CDPH. CDPH is an</p> |
| <p style="text-align: right;">Page 271</p> <p>1 MR. PIFKO: Objection. Assumes</p> <p>2 facts not in evidence.</p> <p>3 A. I recall it being part of the</p> <p>4 application for the CORAP grant and for all of</p> <p>5 our -- for the proposal that was submitted to</p> <p>6 the Department of Justice.</p> <p>7 - - - - -</p> <p>8 (Thereupon, Deposition Exhibit 15,</p> <p>9 E-Mail String Beginning Bates Stamp</p> <p>10 CLEVE_000298635, was marked for</p> <p>11 purposes of identification.)</p> <p>12 - - - - -</p> <p>13 Q. I'm marking as Exhibit 15 one of the</p> <p>14 many documents produced to us yesterday, the day</p> <p>15 before this deposition, of course, that I did</p> <p>16 not get a chance to review until I landed here</p> <p>17 in Cleveland at about midnight. It's marked as</p> <p>18 Exhibit 15. This is Cleveland 298635. It is an</p> <p>19 e-mail from you, Ms. Gordon, to Jana Rush and</p> <p>20 David Gretick, correct?</p> <p>21 A. Yes.</p> <p>22 Q. It says in the third line down --</p> <p>23 or, excuse me, backing up -- it says, "All,</p> <p>24 please note I spoke with leadership at OARRS and</p> <p>25 with Cameron McNamee." Who is Cameron McNamee?</p> | <p style="text-align: right;">Page 273</p> <p>1 acronym for the Cleveland Department of Public</p> <p>2 Health.</p> <p>3 Q. Okay, but do you know -- you wrote</p> <p>4 this e-mail -- who it was that expected to</p> <p>5 receive data from OARRS but did not follow up</p> <p>6 with writing a letter?</p> <p>7 A. No, I do not.</p> <p>8 Q. You don't know. Was it the City of</p> <p>9 Cleveland in any way? Was it Cuyahoga County?</p> <p>10 Do you know?</p> <p>11 A. I do not know.</p> <p>12 Q. Okay. You wrote this e-mail --</p> <p>13 never mind.</p> <p>14 Do you agree that some patients</p> <p>15 benefit from taking prescription opioids?</p> <p>16 MR. PIFKO: Objection. Asked and</p> <p>17 answered. Foundation. Calls for expert</p> <p>18 opinion. Incomplete hypothetical.</p> <p>19 You can answer.</p> <p>20 A. For its intended use, I would</p> <p>21 believe so.</p> <p>22 Q. Do you agree that the only way a</p> <p>23 person can lawfully obtain a prescription opioid</p> <p>24 is with a valid prescription from a licensed</p> <p>25 physician?</p>                                                                                                                                                                                                                |

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| <p style="text-align: right;">Page 274</p> <p>1 MR. PIFKO: Objection. Calls for a<br/>2 legal conclusion. Speculation.<br/>3 A. I don't know with specificity.<br/>4 Q. Do you agree that prescription<br/>5 opioids to this day remain approved as safe and<br/>6 effective by the FDA?<br/>7 MR. PIFKO: Objection. Foundation.<br/>8 A. Sorry. You're going so fast.<br/>9 Q. Sorry. Let me read it slower. I<br/>10 apologize. You've been here -- it's a long day.<br/>11 Do you agree that prescription opioids are<br/>12 approved as safe and effective by the FDA even<br/>13 to this day?<br/>14 MR. PIFKO: Objection. Foundation.<br/>15 A. I don't know that statement for a<br/>16 fact.<br/>17 Q. Do you agree that the majority of<br/>18 people who take a prescription opioid do not<br/>19 become addicted?<br/>20 MR. PIFKO: Objection. Foundation.<br/>21 A. Sorry. You have to repeat the<br/>22 question again.<br/>23 Q. Sure.<br/>24 Do you agree that the majority of<br/>25 people who take prescription opioids do not</p>                                                                                                      | <p style="text-align: right;">Page 276</p> <p>1 A. I did not conduct my own<br/>2 investigation, no.<br/>3 Q. Do you agree that the majority of<br/>4 prescription opioid users never go on to try an<br/>5 illegal substance like heroine, fentanyl or<br/>6 carfentanil?<br/>7 MR. PIFKO: Objection. Foundation.<br/>8 Speculation. Assumes facts not in evidence.<br/>9 A. I don't know.<br/>10 Q. Do you agree that many residents<br/>11 here in Cleveland live with chronic pain?<br/>12 A. I don't know.<br/>13 Q. Do you agree that many residents<br/>14 here in Cleveland suffer from temporary pain,<br/>15 for example, postoperative pain when they leave<br/>16 the Cleveland Clinic?<br/>17 MR. PIFKO: Objection. Foundation.<br/>18 A. I don't -- I don't know.<br/>19 Q. Do you agree that all patients in<br/>20 pain deserve to have their pain treated?<br/>21 MR. PIFKO: Objection. Incomplete<br/>22 hypothetical. Foundation.<br/>23 A. It's a very hypothetical question.<br/>24 Q. Well, let me ask you this way: Do<br/>25 you believe patients in pain should not be</p> |
| <p style="text-align: right;">Page 275</p> <p>1 become addicted to opioids?<br/>2 MR. PIFKO: Objection. Foundation.<br/>3 Calls for expert opinion.<br/>4 A. I'm sorry. One more time. Do I<br/>5 know for a fact what?<br/>6 Q. No. No. No. I didn't say for a<br/>7 fact. Do you agree that the majority of people<br/>8 who take prescription opioids do not become<br/>9 addicted to prescription opioids?<br/>10 MR. PIFKO: Same objections.<br/>11 A. I cannot agree to that. I don't<br/>12 know one way or the other.<br/>13 Q. Did you ever investigate what<br/>14 percentage of prescription opioid users become<br/>15 addicted to opioids?<br/>16 A. I review a lot of information.<br/>17 Again, this is an issue we've been dealing with<br/>18 for a number of years and there are a number of<br/>19 factors that -- that contribute to it all. That<br/>20 particular statement, I don't know that I can<br/>21 comment on that one.<br/>22 Q. Do you know if you ever conducted<br/>23 personally an investigation into what percentage<br/>24 of people who use a prescription opioid end up<br/>25 becoming addicted to opioids?</p> | <p style="text-align: right;">Page 277</p> <p>1 treated for that pain?<br/>2 MR. PIFKO: Objection. Vague. Same<br/>3 objections as to the prior question.<br/>4 You can answer.<br/>5 A. I'm sorry. You have to ask it<br/>6 again.<br/>7 Q. Okay. I'll ask it the way I asked<br/>8 it the first time. Do you agree that all<br/>9 patients who are suffering from pain deserve to<br/>10 have their pain treated?<br/>11 MR. PIFKO: Same objections.<br/>12 A. People who may have health needs and<br/>13 need -- if they have medical conditions or<br/>14 health needs, then they should have access to<br/>15 healthcare and -- they should have access to<br/>16 healthcare.<br/>17 Q. Including patients who are suffering<br/>18 from pain?<br/>19 A. Sure.<br/>20 Q. Do you agree that doctors are in the<br/>21 best position to evaluate whether a medication's<br/>22 benefits outweigh its risks for a particular<br/>23 patient?<br/>24 MR. PIFKO: Objection. Incomplete<br/>25 hypothetical. Foundation.</p>                                                                        |

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| <p style="text-align: right;">Page 278</p> <p>1 A. Doctors who have the certifications<br/>2 to be able to practice medicine and -- yeah.<br/>3 Sure.<br/>4 Q. Do you agree that some of the<br/>5 medications distributed by the distributor<br/>6 defendants who you've sued in this case help<br/>7 save lives of residents here in Cleveland?<br/>8 MR. PIFKO: Objection. Assumes<br/>9 facts not in evidence.<br/>10 A. I don't know.<br/>11 Q. Do you agree that there are<br/>12 individuals living with high cholesterol, for<br/>13 example, who would suffer a heart attack if they<br/>14 didn't have access to their cholesterol meds?<br/>15 MR. PIFKO: Objection. Calls for<br/>16 speculation. Incomplete hypothetical.<br/>17 Q. You can answer.<br/>18 A. I'm sorry. What was your question?<br/>19 MR. SALIMBENE: Can you read it<br/>20 back, please?<br/>21 (Record read.)<br/>22 A. I am not a doctor to be able to<br/>23 confirm that statement.<br/>24 Q. What are the potential consequences<br/>25 to residents here in Cleveland if the Department</p>                                                                                                                                                                           | <p style="text-align: right;">Page 280</p> <p>1 best with all of the issues that are -- that are<br/>2 impacting our community.<br/>3 Q. So is it fair to say if you fail to<br/>4 fulfill your duty as the Department of Public<br/>5 Health, the health of the citizens of Cleveland<br/>6 could suffer?<br/>7 MR. PIFKO: Objection. Vague.<br/>8 Overbroad.<br/>9 A. I think that there would be a<br/>10 dramatic impact on the city, yes.<br/>11 Q. Do you agree that a patient's<br/>12 insurance company has access to patient-specific<br/>13 data?<br/>14 MR. PIFKO: Objection. Calls for<br/>15 speculation. Foundation.<br/>16 A. If a patient's insurance company has<br/>17 access to --<br/>18 Q. That patient's patient-specific<br/>19 data, yes.<br/>20 A. What kind of data?<br/>21 Q. Data about what medications they're<br/>22 using, for example.<br/>23 Let me back up. You worked for an<br/>24 insurance company, true?<br/>25 A. I did.</p>                                                                                                       |
| <p style="text-align: right;">Page 279</p> <p>1 of Public Health fails to fulfill its duties?<br/>2 MR. PIFKO: Objection. Vague.<br/>3 Overbroad. Incomplete hypothetical.<br/>4 A. You're speaking so quickly. I'm<br/>5 trying to understand your question.<br/>6 Q. I'll slow it down. I'm sorry. I'll<br/>7 slow it down.<br/>8 What are the potential consequences<br/>9 to Cleveland residents if the Department of<br/>10 Public Health fails to fulfill its duties?<br/>11 MR. PIFKO: Objection. Vague.<br/>12 Overbroad. Incomplete hypothetical.<br/>13 A. We offer a lot of programs in the<br/>14 area of prevention, and prevention is so<br/>15 critical to -- to disease intervention and<br/>16 stopping the spread of disease. A lot of our<br/>17 work in inspections and licensing are so<br/>18 important to food safety and to the environment<br/>19 and to communicable diseases, et cetera, and --<br/>20 this is incredibly critical work that we do.<br/>21 There's a common phrase in public health, public<br/>22 health saved your life today, you just don't<br/>23 know it. And this is part of what we do<br/>24 collectively as a department of about 160 that<br/>25 is really resource strapped and trying to do our</p> | <p style="text-align: right;">Page 281</p> <p>1 Q. What was the name of the insurance<br/>2 company?<br/>3 A. Kaiser Permanente of Ohio.<br/>4 Q. Okay. So, for example, did Kaiser<br/>5 Permanente -- if one of your members went into a<br/>6 pharmacy, filled a prescription that was<br/>7 reimbursed by Kaiser, did Kaiser have a record<br/>8 of that transaction?<br/>9 MR. PIFKO: Objection. Foundation.<br/>10 Speculation.<br/>11 A. They would have had a record of that<br/>12 transaction if it was put on their insurance<br/>13 card, sure.<br/>14 Q. And that's true for prescription<br/>15 opioid medications, correct?<br/>16 MR. PIFKO: Objection. Incomplete<br/>17 hypothetical.<br/>18 A. If it's put on their insurance card,<br/>19 I would assume so, yes.<br/>20 Q. All right. And is it also true that<br/>21 they would have information about which medical<br/>22 doctor was writing the prescription that was<br/>23 filled, assuming it was processed through the<br/>24 insurance coverage?<br/>25 MR. PIFKO: Objection. Foundation.</p> |

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| <p style="text-align: right;">Page 282</p> <p>1 Speculation.</p> <p>2 A. I would assume so, yes.</p> <p>3 Q. And, also, it would have data about</p> <p>4 where it is that patients are filling the</p> <p>5 prescriptions of course so long as the patients</p> <p>6 use their insurance to process that -- excuse</p> <p>7 me, to pay for that prescription?</p> <p>8 MR. PIFKO: Foundation.</p> <p>9 Speculation.</p> <p>10 A. Only from my experience at Kaiser,</p> <p>11 because they had their own pharmacies and so</p> <p>12 they would know that from filling the</p> <p>13 prescription specifically.</p> <p>14 Q. What were the years you were at</p> <p>15 Kaiser? Remind me.</p> <p>16 A. I was community benefit manager at</p> <p>17 Kaiser, so I did not work in the insurance side.</p> <p>18 I worked there -- I don't remember the dates --</p> <p>19 approximately 2000 -- perhaps '09 to 2016.</p> <p>20 Q. Okay. Did you have a formulary --</p> <p>21 excuse me. Not did you. Sorry.</p> <p>22 Did Kaiser have a formulary for</p> <p>23 which medications it would cover and which would</p> <p>24 be excluded throughout the time you were at</p> <p>25 Kaiser?</p> | <p style="text-align: right;">Page 284</p> <p>1 today in our seven hours to come back and ask</p> <p>2 questions about the 150-ish documents that were</p> <p>3 handed to us -- delivered to us last night. Or</p> <p>4 600. Whatever.</p> <p>5 THE VIDEOGRAPHER: Off the record.</p> <p>6 The time is 5:33.</p> <p>7 (Recess had.)</p> <p>8 THE VIDEOGRAPHER: Back on the</p> <p>9 record. The time is 5:46.</p> <p>10 EXAMINATION OF MERLE GORDON</p> <p>11 BY MR. RUIZ:</p> <p>12 Q. Good afternoon, Director Gordon.</p> <p>13 A. Good afternoon.</p> <p>14 Q. My name is Anthony Ruiz and I</p> <p>15 represent CVS Indiana, LLC and CVS Rx Services,</p> <p>16 Inc. I'm going to be asking you a couple of</p> <p>17 questions.</p> <p>18 So, first, I know you talked a</p> <p>19 little bit earlier about your knowledge of</p> <p>20 regulation of controlled substances. I wanted</p> <p>21 to ask you first, have you heard of the</p> <p>22 Controlled Substances Act?</p> <p>23 A. I have heard of it, yes.</p> <p>24 Q. Do you know what it does?</p> <p>25 A. I really don't.</p> |
| <p style="text-align: right;">Page 283</p> <p>1 MR. PIFKO: Objection. Foundation.</p> <p>2 Speculation.</p> <p>3 A. That is my general understanding.</p> <p>4 Q. Had you ever reviewed that</p> <p>5 formulary?</p> <p>6 A. I did not have a purpose to review</p> <p>7 that formulary.</p> <p>8 Q. Did you ever express to anybody at</p> <p>9 Kaiser that prescription opioids should not be</p> <p>10 included in the formulary?</p> <p>11 A. I would have -- that's not part of</p> <p>12 my responsibility. I didn't have any part of</p> <p>13 that work.</p> <p>14 Q. Fair to say, then, you never made</p> <p>15 the recommendation to anybody at Kaiser that the</p> <p>16 company should not include in its formulary</p> <p>17 prescription opioids?</p> <p>18 A. No recollection that I -- I have no</p> <p>19 recollection.</p> <p>20 MR. SALIMBENE: Okay. Thank you. I</p> <p>21 think I'm going to -- oh, you know what,</p> <p>22 actually, just before I go, I do want to</p> <p>23 reiterate the objection that was raised earlier</p> <p>24 today about the late production of documents,</p> <p>25 and we're going to leave, I think, some time</p>                      | <p style="text-align: right;">Page 285</p> <p>1 Q. Do you know that drugs are placed on</p> <p>2 schedules?</p> <p>3 A. I don't know what that means, no.</p> <p>4 Q. Okay. So you don't know how drugs</p> <p>5 are classified at the federal level?</p> <p>6 A. I do not.</p> <p>7 Q. Okay. Have you ever heard the term</p> <p>8 "ARCOS"?</p> <p>9 MR. PIFKO: Aside from</p> <p>10 communications with counsel, you can answer.</p> <p>11 A. Aside from communications with</p> <p>12 counsel, no, I have not.</p> <p>13 Q. It stands for Automated Reports and</p> <p>14 Consolidated Ordering System. Does that change</p> <p>15 your answer at all?</p> <p>16 A. No, it does not.</p> <p>17 Q. Okay. Are you familiar with the</p> <p>18 Ohio Board of Pharmacy?</p> <p>19 A. I am aware that there is a board of</p> <p>20 pharmacy in Ohio.</p> <p>21 Q. Do you interact with them at all?</p> <p>22 A. I do not.</p> <p>23 MR. RUIZ: I think we're at 16. Is</p> <p>24 that right?</p> <p>25 MR. PIFKO: The exhibits, yes.</p>                                                          |

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| <p style="text-align: right;">Page 286</p> <p>1 MR. RUIZ: I'm going to mark Exhibit<br/>2 16, 17 and 18.<br/>3 - - - - -<br/>4 (Thereupon, Deposition Exhibit 16,<br/>5 Cuyahoga County Opiate Task Force<br/>6 Report 2014 Beginning Bates Stamp<br/>7 CUYAH_000018534, was marked for<br/>8 purposes of identification.)<br/>9 - - - - -<br/>10 (Thereupon, Deposition Exhibit 17,<br/>11 Cuyahoga County Opiate Task Force<br/>12 Report 2015 Beginning Bates Stamp<br/>13 CLEVE_000187871, was marked for<br/>14 purposes of identification.)<br/>15 - - - - -<br/>16 (Thereupon, Deposition Exhibit 18,<br/>17 Cuyahoga County Opiate Task Force<br/>18 Report 2016 Beginning Bates Stamp<br/>19 CUYAH_000018265, was marked for<br/>20 purposes of identification.)<br/>21 - - - - -<br/>22 Q. So I've handed you three documents.<br/>23 The first, which is Exhibit 16, is the 2014<br/>24 Cuyahoga County Opiate Task Force Report, and<br/>25 that is Bates number CUYAH 18534. The second</p>                                                                                                     | <p style="text-align: right;">Page 288</p> <p>1 yes.<br/>2 Q. And would you review them?<br/>3 A. When I have time to review them, I<br/>4 do. I've looked through them when they arrived.<br/>5 Q. Okay. And I think you said earlier<br/>6 that when you were getting ready to interview<br/>7 for this job that you currently have as<br/>8 director, that you reviewed what I believe you<br/>9 said is a 2014 attorney general report; is that<br/>10 right?<br/>11 A. There is information that came out<br/>12 from the Ohio Attorney General that was -- came<br/>13 out, I believe, in 2014 that part of which I did<br/>14 review, along with a number of other pieces of<br/>15 information, just to familiarize myself with the<br/>16 other issues related to the City of Cleveland.<br/>17 Q. Right.<br/>18 So reviewing documents like this is<br/>19 part of how you educate yourself or familiarize<br/>20 yourself with opioid issues in your county, in<br/>21 your city?<br/>22 A. It's one of many ways.<br/>23 Q. Okay. And if you could look back in<br/>24 that pile to Exhibit 2, and that is the 2010<br/>25 Ohio Prescription Drug Abuse Task Force report.</p> |
| <p style="text-align: right;">Page 287</p> <p>1 document is the 2015 version of that report with<br/>2 Bates number CLEVE 187871. And then the third<br/>3 document, which is Exhibit 18, is the 2016<br/>4 version of that report, which is CUYAH 18265.<br/>5 I'll give you a second to finish looking through<br/>6 them.<br/>7 A. Thank you. Okay.<br/>8 Q. Are you familiar with these three<br/>9 reports?<br/>10 A. I have some familiarity with these<br/>11 reports, yes.<br/>12 Q. And I believe you said earlier that<br/>13 you are a member of the Cuyahoga Opiate Task<br/>14 Force; is that right?<br/>15 A. I am on the distribution of<br/>16 information for this particular task force.<br/>17 Q. And your department is a member; is<br/>18 that correct?<br/>19 A. I don't know if member is the exact<br/>20 term, but yes, they are part of this task force.<br/>21 Q. Okay. And would you have received<br/>22 these reports as part of your activities as<br/>23 director?<br/>24 A. I would. These, along with so many<br/>25 other reports that I receive on a regular basis,</p> | <p style="text-align: right;">Page 289</p> <p>1 A. Um-hum. Yes.<br/>2 Q. Do you have any memory of reviewing<br/>3 that or reading it when it came out?<br/>4 A. I do not.<br/>5 Q. Is it something that you think you<br/>6 might have come across?<br/>7 A. I have no recollection of coming<br/>8 across this particular document.<br/>9 Q. But is it something that you expect<br/>10 you might have?<br/>11 A. I cannot say for sure. This is a<br/>12 2010 document, and in my capacity as the health<br/>13 director I don't know that I would have this --<br/>14 this information going back this far.<br/>15 Q. Okay. Around the time that this<br/>16 came out in 2010 you would have been working at<br/>17 Kaiser Permanente, right?<br/>18 A. Yes.<br/>19 Q. Okay. And you've worked in the<br/>20 public health field for a decade, longer?<br/>21 A. Much of my career.<br/>22 Q. And you said that you are a consumer<br/>23 of news and like to keep on top of issues that<br/>24 are important to your community?<br/>25 A. To the extent that I can, yes.</p>                                                                                                          |

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| <p style="text-align: right;">Page 290</p> <p>1 Q. Now, given that you reviewed -- that<br/>2 these Cuyahoga County Task Force reports came<br/>3 across your desk and are something that you<br/>4 would have reviewed -- is that what you said?<br/>5 A. I cannot say that they are all of<br/>6 them. I have -- I know that they look familiar<br/>7 to me and I know that I have looked through at<br/>8 least the 2016 one.<br/>9 Q. But it's the kind of document that<br/>10 you would expect a director of public health to<br/>11 have seen and read?<br/>12 A. To have seen, yes.<br/>13 Q. Okay. Would you have expected the<br/>14 director at the time in 2010 to have read the<br/>15 2010 report?<br/>16 MR. PIFKO: Objection. Calls for<br/>17 speculation.<br/>18 A. I can't speak to that.<br/>19 Q. Do you think if you were the<br/>20 director at the time you would have been aware<br/>21 of it?<br/>22 MR. PIFKO: Objection. Calls for<br/>23 speculation. Incomplete hypothetical.<br/>24 A. There are a number of reports that<br/>25 come out on a regular basis that I receive, and</p> | <p style="text-align: right;">Page 292</p> <p>1 column, it says, "The Cuyahoga County Opiate<br/>2 Task Force was formed in 2010 to find solutions<br/>3 to the increasing number of accidental<br/>4 drug-related deaths."<br/>5 A. Okay.<br/>6 Q. Did I read that right?<br/>7 A. You read what was on the document.<br/>8 Q. Does that suggest to you that in<br/>9 2010 Cuyahoga knew that opioids were a problem<br/>10 in the county?<br/>11 MR. PIFKO: Objection. Speculation.<br/>12 Foundation.<br/>13 A. Based --<br/>14 MR. PIFKO: Incomplete hypothetical.<br/>15 A. Based on what's written here, trying<br/>16 to find solutions to the increasing number of<br/>17 accidental drug-related deaths, and that's what<br/>18 the task force -- why the task force was formed.<br/>19 Q. Right. So the task force was formed<br/>20 in 2010?<br/>21 A. In 2010.<br/>22 Q. To solve a problem related to<br/>23 opioids?<br/>24 MR. PIFKO: Objection. Foundation.<br/>25 Speculation.</p> |
| <p style="text-align: right;">Page 291</p> <p>1 I would imagine that my predecessors had<br/>2 received as well.<br/>3 Q. So is that a yes, that you expect<br/>4 that they would have seen it?<br/>5 A. I can't speak to that.<br/>6 Q. Would you expect, if you were the<br/>7 director, that you would have seen it?<br/>8 MR. PIFKO: Objection. Incomplete<br/>9 hypothetical. Speculation.<br/>10 A. Honestly, I don't know how it was<br/>11 distributed. I don't know what the involvement<br/>12 of the director at the time was with whether or<br/>13 not a task force was formed or whether or not<br/>14 they were on the receiving end of this document<br/>15 or would have had knowledge of it.<br/>16 Q. Well, let's look at the -- let's<br/>17 look at the 2016 report. If you could turn<br/>18 to -- these don't have page numbers on them, but<br/>19 they do have the Bates numbers at the bottom<br/>20 right-hand corner.<br/>21 A. Okay.<br/>22 Q. And it ends in 268. Do you see<br/>23 that?<br/>24 A. I do.<br/>25 Q. And if you look on the left-hand</p>                              | <p style="text-align: right;">Page 293</p> <p>1 A. Well, it says here to find<br/>2 solutions, yes.<br/>3 Q. And that suggests that they thought<br/>4 there was a problem in 2010, right?<br/>5 MR. PIFKO: Objection. Speculation.<br/>6 Foundation.<br/>7 A. Well, they're responding to deaths,<br/>8 and yeah, public health is -- part of it is<br/>9 working around issues related to why people are<br/>10 dying, yes.<br/>11 Q. And if you turn to the 2014<br/>12 report -- I'm sorry. I mean the 2015 report.<br/>13 Apologies.<br/>14 A. 2015?<br/>15 Q. Yes.<br/>16 A. Um-hum.<br/>17 Q. And if you look on the bottom<br/>18 left-hand corner, there are page numbers. If<br/>19 you go to page 4 of that report.<br/>20 A. Okay.<br/>21 Q. And there it says at the top, first<br/>22 paragraph, "Cuyahoga County was recognized in<br/>23 2010 as one of the top five areas in Ohio being<br/>24 impacted by prescription drug abuse." Do you<br/>25 see that?</p>                   |

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| <p style="text-align: right;">Page 294</p> <p>1 A. I do.</p> <p>2 Q. And does that suggest to you that</p> <p>3 they knew this was a problem in 2010?</p> <p>4 MR. PIFKO: Objection. Speculation.</p> <p>5 Foundation.</p> <p>6 A. It would suggest to me that it</p> <p>7 was -- they were one of the top five areas in</p> <p>8 Ohio being impacted by prescription drug abuse,</p> <p>9 just as it states here in the document that I</p> <p>10 had nothing to do with writing.</p> <p>11 Q. And would you expect them to know</p> <p>12 that they -- that they were one of the top five</p> <p>13 areas in Ohio being impacted?</p> <p>14 MR. PIFKO: Objection. Speculation.</p> <p>15 Foundation.</p> <p>16 A. I can only assume that the reason</p> <p>17 why they would write it in a publication that</p> <p>18 was widely distributed or was distributed -- I</p> <p>19 can't say if it was widely distributed -- that</p> <p>20 they would put an assertion like this in based</p> <p>21 on something.</p> <p>22 Q. And the Cleveland Department of</p> <p>23 Public Health was a part of this task force</p> <p>24 since at least 2010, right?</p> <p>25 A. I do not know that. I do not know</p>                                                       | <p style="text-align: right;">Page 296</p> <p>1 MR. PIFKO: Objection. Foundation.</p> <p>2 Speculation.</p> <p>3 A. Well, in an e-mail that I received</p> <p>4 back in 2016, this individual did put this in</p> <p>5 this e-mail, so I suspect we could draw that</p> <p>6 conclusion.</p> <p>7 Q. Do you have any reason to doubt what</p> <p>8 he wrote to you?</p> <p>9 MR. PIFKO: Objection. Foundation.</p> <p>10 Speculation.</p> <p>11 A. I do not.</p> <p>12 Q. Is it fair to say that Cleveland --</p> <p>13 the City of Cleveland knew there was an opioid</p> <p>14 problem in their city since at least 2010?</p> <p>15 MR. PIFKO: Objection. Vague.</p> <p>16 Overbroad. Speculation. Foundation.</p> <p>17 A. Repeat your question, please.</p> <p>18 Q. Is it fair to say that the City of</p> <p>19 Cleveland knew that there was an opioid problem</p> <p>20 in the city in -- at least as early as 2010?</p> <p>21 MR. PIFKO: Same objections.</p> <p>22 A. I don't know when they first --</p> <p>23 first recognized it. What is stated in here is</p> <p>24 that David Gretick, who was the program director</p> <p>25 for the Office of Mental Health and Substance</p> |
| <p style="text-align: right;">Page 295</p> <p>1 when the Cleveland Department of Public Health</p> <p>2 was part of -- invited to be part of the</p> <p>3 Cuyahoga County Opiate Task Force.</p> <p>4 - - - - -</p> <p>5 (Thereupon, Deposition Exhibit 19,</p> <p>6 E-Mail String Beginning Bates Stamp</p> <p>7 CLEVE_000187408, was marked for</p> <p>8 purposes of identification.)</p> <p>9 - - - - -</p> <p>10 Q. Well, let's look at what I've marked</p> <p>11 as Exhibit 19, which is an e-mail from David</p> <p>12 Gretick to you, and it is CLEVE 187408.</p> <p>13 A. Okay.</p> <p>14 Q. And if you look at the second e-mail</p> <p>15 in the chain, which is also from David Gretick</p> <p>16 to you, in the second paragraph, the second</p> <p>17 sentence, he writes, "My current affiliations</p> <p>18 and activities related to the opiate issue</p> <p>19 include the Cuyahoga County Opiate Task Force.</p> <p>20 (I represented CDPH as one of the founding</p> <p>21 members when it was known as 'Prescription for</p> <p>22 Prevention' in 2010, and continue to attend</p> <p>23 bi-monthly meetings)." Does that mean that the</p> <p>24 Department of Public Health was a part of the</p> <p>25 task force since at least 2010?</p> | <p style="text-align: right;">Page 297</p> <p>1 Abuse, stated that he was one of the founding</p> <p>2 members of the task force.</p> <p>3 Q. Well, let's break it down a little</p> <p>4 bit.</p> <p>5 So we know in 2010 Ohio issued a</p> <p>6 report on opioid abuse, prescription abuse,</p> <p>7 prescription drug abuse in the State of Ohio; is</p> <p>8 that right?</p> <p>9 MR. PIFKO: Objection. Foundation.</p> <p>10 A. Are you referring to this report</p> <p>11 here?</p> <p>12 Q. Yes.</p> <p>13 MR. BOEHM: Can you just say what</p> <p>14 you're referring to on the record?</p> <p>15 MR. PIFKO: She's looking at Exhibit</p> <p>16 2.</p> <p>17 A. Again, your question?</p> <p>18 Q. So we know that the State of Ohio</p> <p>19 issued that report in 2010, right?</p> <p>20 MR. PIFKO: Objection. Foundation.</p> <p>21 A. That's the date on the report, yes.</p> <p>22 Q. And we looked at a document, one of</p> <p>23 the Ohio task reports, that said that the</p> <p>24 Cuyahoga County Task Force was set up in 2010 as</p> <p>25 well, right?</p>                                                                                                               |

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| <p style="text-align: right;">Page 298</p> <p>1 A. Right. You're asking me a lot of<br/>2 questions about dates that precede my time at<br/>3 the Cleveland Department of Public Health and I<br/>4 can't speak to how any decisions were made or<br/>5 what our engagement was prior to that.<br/>6 Q. Well, let's just back up. I'm not<br/>7 asking you that. I'm just asking, in 2010 Ohio<br/>8 issued the final report that is Exhibit 2,<br/>9 right?<br/>10 A. That is the date on the document,<br/>11 yes.<br/>12 Q. And then we also looked at one of<br/>13 the Cuyahoga County Task Force reports that said<br/>14 that the Cuyahoga County Task Force was set up<br/>15 in 2010?<br/>16 A. Right.<br/>17 Q. And we also just looked at an e-mail<br/>18 where someone who works for the Department of<br/>19 Public Health said that the department has been<br/>20 part of the Cuyahoga County Task Force since<br/>21 2010?<br/>22 A. Right.<br/>23 Q. Is it fair to say that the City of<br/>24 Cleveland by 2010 knew there was an opioid<br/>25 problem in the city?</p> | <p style="text-align: right;">Page 300</p> <p>1 that hydrocodone combination products have a<br/>2 lower risk for abuse than other -- than schedule<br/>3 II drugs?<br/>4 A. I am not aware of a memo of that<br/>5 nature, no.<br/>6 Q. And you don't know anything about<br/>7 the analysis they did of abuse data; is that<br/>8 right?<br/>9 A. I'm not aware of that, no.<br/>10 Q. And you're not aware that they found<br/>11 that hydrocodone products -- hydrocodone<br/>12 combination products are abused at rates more<br/>13 similar to other schedule III drugs rather than<br/>14 schedule II drugs?<br/>15 A. This is an area that I am not<br/>16 familiar so I cannot answer that question. I<br/>17 don't know.<br/>18 Q. And so you don't know how many<br/>19 people in the City of Cleveland overdose from<br/>20 hydrocodone combination products?<br/>21 A. I don't know, no.<br/>22 Q. You haven't done anything to trace<br/>23 the deaths in your city to hydrocodone<br/>24 combination products?<br/>25 A. No, I have not.</p>                          |
| <p style="text-align: right;">Page 299</p> <p>1 MR. PIFKO: Objection. Foundation.<br/>2 Speculation.<br/>3 A. By 2010?<br/>4 Q. At least.<br/>5 A. By 2010, yeah, you could make that<br/>6 assumption.<br/>7 Q. Okay. Now I'm going to transition<br/>8 to something different.<br/>9 Do you know what a hydrocodone<br/>10 combination product is?<br/>11 A. I do not.<br/>12 Q. Have you ever heard the term?<br/>13 A. I can't say that I have or have not.<br/>14 I've heard a lot of terms pertaining to this<br/>15 issue. That specifically I can't speak to.<br/>16 Q. So you can't name any examples of a<br/>17 hydrocodone combination product?<br/>18 A. I'm not a pharmacist.<br/>19 Q. You don't know how they are<br/>20 scheduled by the DEA?<br/>21 A. I do not.<br/>22 Q. So I'm guessing that you don't know<br/>23 that in 2008 the U.S. Department of Health and<br/>24 Human Services and the Food and Drug<br/>25 Administration issued a memo where they found</p>                                                                                                 | <p style="text-align: right;">Page 301</p> <p>1 Q. To trace opioid addiction to<br/>2 hydrocodone combination products?<br/>3 A. Not that I'm aware of, to anything<br/>4 specific like that, no.<br/>5 Q. Okay. Part of what this lawsuit is<br/>6 about is to -- the City of Cleveland is trying<br/>7 to collect -- is alleging damages based on the<br/>8 cost to the city from the opioid -- from opioid<br/>9 use in the city; is that correct?<br/>10 MR. PIFKO: Objection. Calls for a<br/>11 legal opinion, legal conclusion.<br/>12 Aside from conversations with<br/>13 counsel, you can answer.<br/>14 A. That's basically what I've come to<br/>15 understand, yes.<br/>16 Q. Okay. Can you connect any costs<br/>17 from opioid use in your city to any drug<br/>18 distributed by a CVS company?<br/>19 MR. PIFKO: Objection. Foundation.<br/>20 Objection to the extent the question calls for<br/>21 an expert opinion.<br/>22 You can answer.<br/>23 A. That's not in my purview.<br/>24 Q. Okay. Can you do that for any drug<br/>25 distributed by Wal-Mart?</p> |


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| <p style="text-align: right;">Page 302</p> <p>1 MR. PIFKO: Same objections.<br/> 2 A. That's not in my purview.<br/> 3 Q. Can you do that for any drug<br/> 4 distributed by Walgreens?<br/> 5 MR. PIFKO: Same objections.<br/> 6 A. It's not in my purview.<br/> 7 Q. Can you do that for any drug<br/> 8 distributed by Rite-Aid?<br/> 9 MR. PIFKO: Same objections.<br/> 10 A. It's not in my purview.<br/> 11 Q. Can you identify a single medication<br/> 12 that was inappropriately prescribed by a doctor?<br/> 13 MR. PIFKO: Objection. Foundation.<br/> 14 A. I'm sorry. I don't understand your<br/> 15 question.<br/> 16 Q. Can you identify any medication, any<br/> 17 instance in which a medication was prescribed by<br/> 18 a doctor that was done inappropriately?<br/> 19 MR. PIFKO: Objection. Foundation.<br/> 20 A. I don't know of one instance<br/> 21 specifically, no.<br/> 22 Q. Okay. Can you identify any instance<br/> 23 in which a pharmacy dispensed an opioid<br/> 24 inappropriately?<br/> 25 MR. PIFKO: Objection. Foundation.</p>                                                                                          | <p style="text-align: right;">Page 304</p> <p>1 A. I have no knowledge of that.<br/> 2 Q. Have you ever reached out to<br/> 3 Rite-Aid?<br/> 4 A. I did not.<br/> 5 Q. To Walgreens?<br/> 6 A. I did not.<br/> 7 Q. To Wal-Mart?<br/> 8 A. I did not.<br/> 9 Q. Do you know if your department has<br/> 10 ever done that?<br/> 11 A. I do not have knowledge of that<br/> 12 specifically, no.<br/> 13 Q. Why not?<br/> 14 MR. PIFKO: Objection.<br/> 15 A. I don't understand your question.<br/> 16 Q. Well, CVS and Rite-Aid and<br/> 17 Walgreens -- I'll just leave it to CVS. There<br/> 18 are a lot of CVS pharmacies in the City of<br/> 19 Cleveland, right?<br/> 20 MR. PIFKO: Objection. Foundation.<br/> 21 Vague.<br/> 22 A. There are some to my knowledge.<br/> 23 Q. Okay. Why wouldn't you -- if you<br/> 24 have a problem and you believe that that problem<br/> 25 is related to prescription drugs, and you say</p>                                                                                                                                                                                                                                                                                                                                                                                                        |
| <p style="text-align: right;">Page 303</p> <p>1 A. I do not know.<br/> 2 Q. I want to talk about what the<br/> 3 Department of Public Health has done to<br/> 4 investigate the cause of the opioid problem in<br/> 5 your city.<br/> 6 Can you tell me what they've done --<br/> 7 so I know that there -- we've talked a lot<br/> 8 already about what the department does in terms<br/> 9 of education in schools, what they do with<br/> 10 Project DAWN and treatment and with CenterPoint.<br/> 11 I'm not talking about that. All I want to know<br/> 12 is, what has the department done, if anything,<br/> 13 to investigate the causes of the opioid problem<br/> 14 in your city?<br/> 15 A. You know, I really wish I had the<br/> 16 resources and the staffing available to do that<br/> 17 kind of research and to provide that kind of<br/> 18 data so we can really target interventions and<br/> 19 programs and apply for additional resources to<br/> 20 be able to bring these programs to the<br/> 21 community.<br/> 22 Q. Did you ever reach out to CVS for<br/> 23 help?<br/> 24 A. I did not.<br/> 25 Q. Has your department ever?</p> | <p style="text-align: right;">Page 305</p> <p>1 that you don't have the resources to deal with<br/> 2 the problem, why wouldn't you go to these<br/> 3 corporations who are in your neighborhood, who<br/> 4 are involved with dispensing drugs, prescription<br/> 5 drugs, and ask for their help in fighting<br/> 6 whatever opioid problem there is in the city?<br/> 7 MR. PIFKO: Objection. Compound.<br/> 8 Assumes facts not in evidence.<br/> 9 A. The stores are in the neighborhood.<br/> 10 The corporation -- if I had the resources and<br/> 11 the staffing available to -- to do that, and --<br/> 12 we're battling this on the front line. We're<br/> 13 battling addiction. We're battling all these<br/> 14 other public health issues on the front line. I<br/> 15 often don't have the luxury of time to -- to do<br/> 16 that kind of thing specifically. We're dealing<br/> 17 real time with real issues.<br/> 18 Q. And so you couldn't pick up the<br/> 19 phone and try to place a call to one of these<br/> 20 corporations and ask, Hey, look, we're really<br/> 21 strapped for resources here and we could really<br/> 22 use your help in making sure that this opioid<br/> 23 problem doesn't get worse, that it gets better.<br/> 24 Couldn't you have done that?<br/> 25 MR. PIFKO: Objection. Foundation.</p> |

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| <p style="text-align: right;">Page 306</p> <p>1 A. I didn't realize there was a<br/>2 telephone number to call for that kind of --<br/>3 that kind of -- those kinds of resources.<br/>4 Again, we are -- we are trying our best to<br/>5 address all the public health issues in this<br/>6 city and have staff trying to develop ways that<br/>7 we can with the resources we have to battle<br/>8 these -- these issues. These are huge issues in<br/>9 our community. Trying to find resources to<br/>10 address them is -- it's a huge part of our work.<br/>11 Q. Okay. Well, let's look at the 2014<br/>12 Cuyahoga Task Force report again, which is Bates<br/>13 number CUYAH 18534. And that's Exhibit 16.<br/>14 If you go to page 4, at about the<br/>15 middle of the page, the last paragraph before<br/>16 the next section, it says, "We have also<br/>17 partnered with Discount Drug Mart and Marc's to<br/>18 provide outreach to their pharmacy customers."<br/>19 So the task force that your department is a part<br/>20 of has partnered with some pharmacies, right?<br/>21 MR. PIFKO: Objection. Foundation.<br/>22 A. Well, if you read the top of this,<br/>23 it's CCBH. It's the Cuyahoga County Board of<br/>24 Health had partnered with several members of the<br/>25 task force to fulfill the goals of this grant.</p> | <p style="text-align: right;">Page 308</p> <p>1 this is really interesting that you guys are<br/>2 partnering with pharmacies to help provide<br/>3 outreach, how can we do something like that?<br/>4 MR. PIFKO: Objection. Foundation.<br/>5 A. I suppose we could have. I just<br/>6 know that I have staff who are -- limited staff<br/>7 at that, who are out there working on this<br/>8 issue. Any one particular method of<br/>9 intervention or programs specific to addressing<br/>10 this mammoth issue -- I suppose we could have<br/>11 done that.<br/>12 Q. And, in fact, that would maybe have<br/>13 helped your ability to combat the problem<br/>14 because it would -- you would have another<br/>15 partner helping you in the city, right?<br/>16 MR. PIFKO: Objection. Speculation.<br/>17 Assumes facts not in evidence. Incomplete<br/>18 hypothetical.<br/>19 A. With the number of people who have<br/>20 died, the number of non-fatal overdoses that<br/>21 were occurring in the city, just the enormity of<br/>22 the issue, the amount of resources necessary to<br/>23 combat this issue -- I'm not entirely sure --<br/>24 connecting with two local organizations perhaps<br/>25 would have been a drop in the bucket.</p> |
| <p style="text-align: right;">Page 307</p> <p>1 I can't say for sure that the Cleveland<br/>2 Department of Public Health was affiliated with<br/>3 this particular issue. It doesn't state so in<br/>4 the document.<br/>5 Q. So -- okay. But you could have<br/>6 called someone at -- and I'm sorry. What does<br/>7 that stand for, the Cuyahoga County Board of<br/>8 Health?<br/>9 A. Correct.<br/>10 Q. You could have called someone at the<br/>11 Cuyahoga County Board of Health and asked, Hey,<br/>12 you guys have partnered with these pharmacies,<br/>13 we think that's a really great idea, could you<br/>14 tell me how you did that?<br/>15 MR. PIFKO: Objection. Speculation.<br/>16 Foundation.<br/>17 A. I suppose I could have found one<br/>18 sentence in a report that was dated prior to my<br/>19 joining the Cleveland Department of Public<br/>20 Health, but -- I'm sorry. You have to rephrase<br/>21 your question or state your question again,<br/>22 please.<br/>23 Q. Sure.<br/>24 You could have called someone at the<br/>25 Cuyahoga County Board of Health and said, Look,</p>                                                                                                                                                                                                                                  | <p style="text-align: right;">Page 309</p> <p>1 Q. So you don't think that this<br/>2 partnership is useful?<br/>3 A. I did not say that.<br/>4 Q. Well, you think it's a drop in the<br/>5 bucket?<br/>6 A. I did not -- I used those terms. I<br/>7 think you're mischaracterizing what I'm saying<br/>8 here, but this is one -- one intervention in a<br/>9 document that, again, precedes me, and I cannot<br/>10 say for sure that, again, the Cleveland<br/>11 Department of Public Health partnered<br/>12 specifically on -- on this particular<br/>13 intervention. This document doesn't state it<br/>14 and I do not have that knowledge.<br/>15 Q. I want to ask you about -- earlier<br/>16 today you said that pill mills may have<br/>17 contributed to the opioid problem in your city;<br/>18 is that right?<br/>19 MR. PIFKO: Objection to the extent<br/>20 the question mischaracterizes the record.<br/>21 Q. Well, let me just ask it again, if<br/>22 that's okay.<br/>23 Do you believe that pill mills may<br/>24 have contributed to the opioid problem in your<br/>25 city?</p>                                                                                                                                                  |

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| <p style="text-align: right;">Page 310</p> <p>1 MR. PIFKO: Objection. Foundation.<br/> 2 Objection to the extent the question calls for<br/> 3 expert opinion.<br/> 4 You can answer.<br/> 5 A. I don't have that expert opinion. I<br/> 6 don't -- it's been a long day, so how I answered<br/> 7 one question in this long day -- a lot of<br/> 8 contributing factors to -- to this issue.<br/> 9 Q. Okay. Do you know what diversion of<br/> 10 drugs is? Do you know what that means, to<br/> 11 divert drugs?<br/> 12 A. I -- I don't know that I do.<br/> 13 Q. Okay. Do you know what doctor<br/> 14 shopping is?<br/> 15 A. I don't know if that's a technical<br/> 16 term. I don't -- I don't have familiarity with<br/> 17 that.<br/> 18 Q. Have you ever heard of an internet<br/> 19 pharmacy?<br/> 20 A. An internet pharmacy?<br/> 21 Q. Of internet pharmacies generally.<br/> 22 A. Very, very, very generally.<br/> 23 Q. Okay. Do you think they had any<br/> 24 impact on the opioid issue in your city?<br/> 25 MR. PIFKO: Objection. Calls for</p>                                                                                                               | <p style="text-align: right;">Page 312</p> <p>1 MR. PIFKO: Same objection.<br/> 2 Speculation. Expert opinion. Legal conclusion.<br/> 3 Foundation.<br/> 4 A. Again, it's part of the narrative of<br/> 5 the addiction crisis that is happening in this<br/> 6 community.<br/> 7 Q. Okay. What about counterfeit drugs;<br/> 8 is that part of the problem?<br/> 9 MR. PIFKO: Objection. Foundation.<br/> 10 A. I don't know what the legal<br/> 11 description of counterfeit drug is.<br/> 12 Q. Okay. What about patients faking<br/> 13 injuries to get drugs; is that part of the<br/> 14 problem?<br/> 15 MR. PIFKO: Objection to the extent<br/> 16 the question assumes facts not in evidence.<br/> 17 Speculation. Foundation.<br/> 18 A. I don't have any direct knowledge on<br/> 19 that.<br/> 20 Q. What about illegal drugs?<br/> 21 MR. PIFKO: Same objections.<br/> 22 A. Illegal drugs, broadly. We have a<br/> 23 lot of data here that indicates how people have<br/> 24 in that -- the pipeline, and the issue of them<br/> 25 becoming addicted to painkillers and opiates,</p>      |
| <p style="text-align: right;">Page 311</p> <p>1 speculation. Foundation. Expert opinion.<br/> 2 Legal conclusion.<br/> 3 A. I do not know.<br/> 4 Q. Okay. I think earlier you said that<br/> 5 when you were on the city council, you would<br/> 6 hear stories of people breaking into homes<br/> 7 looking for pills; is that right?<br/> 8 A. Yes. Yeah. We've heard lots of<br/> 9 stories from people, yes.<br/> 10 Q. Is theft of prescription drugs a<br/> 11 contributing factor to the opioid problem?<br/> 12 MR. PIFKO: Objection. Calls for<br/> 13 expert opinion. Legal conclusion. Speculation.<br/> 14 Foundation.<br/> 15 You can answer.<br/> 16 A. I think hearing firsthand stories<br/> 17 from individuals and how desperate people became<br/> 18 because of their addiction by resorting to<br/> 19 breaking into people's homes and medicine<br/> 20 cabinets to try to find painkillers and other --<br/> 21 other opiates and other drugs is part of the<br/> 22 narrative of how significant and pervasive this<br/> 23 issue is in our community.<br/> 24 Q. My question was, do you think it<br/> 25 contributed to the opioid problem in your city?</p> | <p style="text-align: right;">Page 313</p> <p>1 that they had to resort to illegal drugs to get<br/> 2 their fix and, unfortunately, lead to ODs, both<br/> 3 fatal and non-fatal, and the addiction crisis<br/> 4 we're in.<br/> 5 Q. Now I want to ask you -- I'm not<br/> 6 going to ask you about anything -- specifically<br/> 7 to read anything in the Cuyahoga Task Force<br/> 8 reports that we've looked at already, but I just<br/> 9 want to ask -- so we looked at an Ohio report in<br/> 10 2010; is that right? Exhibit 2 is a 2010<br/> 11 report?<br/> 12 A. Correct.<br/> 13 Q. And the last one that we looked at<br/> 14 is a 2016 Cuyahoga Task Force report; is that<br/> 15 right?<br/> 16 A. It's one of the exhibits you handed<br/> 17 me.<br/> 18 Q. It's the one right there on top,<br/> 19 Exhibit 18.<br/> 20 A. Um-hum.<br/> 21 Q. So for at least six years the County<br/> 22 of Cuyahoga and the City of Cleveland, as part<br/> 23 of that task force, has been studying the opioid<br/> 24 problem in Ohio, in Cuyahoga County, in the City<br/> 25 of Cleveland?</p> |

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| <p style="text-align: right;">Page 314</p> <p>1 MR. PIFKO: Objection. Foundation.<br/> 2 A. At least, yes.<br/> 3 Q. Okay. Would you be surprised to<br/> 4 know that none of those reports identify the<br/> 5 failure to detect suspicious orders as a cause<br/> 6 of the opioid problem?<br/> 7 MR. PIFKO: Objection. Speculation.<br/> 8 Foundation. Argumentative.<br/> 9 A. Am I surprised? Not necessarily.<br/> 10 Q. Okay.<br/> 11 MR. PIFKO: Can we take a break so<br/> 12 we can figure out this air conditioning issue?<br/> 13 MR. BOEHM: Just before we do that,<br/> 14 I think the air conditioning issue, my sense is<br/> 15 was largely because the windows were not<br/> 16 covered.<br/> 17 MR. RUIZ: Can we go off the record?<br/> 18 THE VIDEOGRAPHER: Off the record.<br/> 19 (Recess had.)<br/> 20 THE VIDEOGRAPHER: Back on the<br/> 21 record, 6:37.<br/> 22 BY MR. RUIZ:<br/> 23 Q. Director Gordon, I want to show you<br/> 24 a -- an article from the Plain Dealer. It does<br/> 25 not have any Bates stamps, but it is -- was</p> | <p style="text-align: right;">Page 316</p> <p>1 compliance standards."<br/> 2 MR. PIFKO: On my version there's<br/> 3 actually blank of 11 pages.<br/> 4 MR. RUIZ: You're right. It's 8 of<br/> 5 11. Thank you.<br/> 6 Q. So, first, this article came out<br/> 7 around the time that you started as director, is<br/> 8 that right, in June 2016?<br/> 9 A. Yes. It's dated -- yeah, June of<br/> 10 2016. Yes.<br/> 11 Q. And if you -- if you actually look<br/> 12 at the bottom of page 7, going onto page 8, it<br/> 13 quotes you as saying that you hope to, quote,<br/> 14 reestablish a high level of service credibility<br/> 15 and integrity back to the, bracket, health<br/> 16 department, closed bracket, and to, quote,<br/> 17 institute rigorous compliance standards, closed<br/> 18 quote, in a department that has, quote,<br/> 19 struggled to be more preventive, proactive and<br/> 20 prospective. Did I read that right?<br/> 21 A. You read what is stated here in this<br/> 22 document, yes.<br/> 23 Q. Do you have any reason to disagree<br/> 24 with that quote that you gave in 2016?<br/> 25 A. I don't recall what I said exactly</p>                                                                                                                                                         |
| <p style="text-align: right;">Page 315</p> <p>1 posted on June 15th, 2016. The title is<br/> 2 "Cleveland's New Health Director, Merle Gordon,<br/> 3 Faces a Daunting Task," and it's Exhibit 19.<br/> 4 MR. PIFKO: I think it should be 20.<br/> 5 MR. RUIZ: It's 20. I'm sorry.<br/> 6 That's Exhibit 20.<br/> 7 - - - - -<br/> 8 (Thereupon, Deposition Exhibit 20,<br/> 9 Article Entitled "Cleveland's New<br/> 10 Health Director, Merle Gordon, Faces<br/> 11 a Daunting Task," was marked for<br/> 12 purposes of identification.)<br/> 13 - - - - -<br/> 14 A. I don't recall reading it when it<br/> 15 came out, but I knew it came out, so I'll read<br/> 16 it now.<br/> 17 Q. I've only got two or three questions<br/> 18 about it.<br/> 19 A. Okay.<br/> 20 Okay.<br/> 21 Q. If you could turn -- these aren't<br/> 22 numbered, but if you could turn to what's page<br/> 23 7. It's the third to last page.<br/> 24 A. What's at the top?<br/> 25 Q. At the top it says, "Rigorous</p>                                                             | <p style="text-align: right;">Page 317</p> <p>1 at my swearing in on that day, but it sounds<br/> 2 about right.<br/> 3 Q. And if you look on page 3, I think<br/> 4 you mentioned earlier today that prior to you<br/> 5 becoming the director, that position had been<br/> 6 vacant for about a year; is that right?<br/> 7 A. I believe it was about a year, yeah.<br/> 8 Q. Okay. And then if you see right<br/> 9 there, about a third of the way down in the<br/> 10 article, it says, "Gordon's two predecessors had<br/> 11 relatively short tenures and little to no public<br/> 12 health or medical training." Is that your<br/> 13 impression or understanding of what the<br/> 14 situation was like before you joined?<br/> 15 A. I know that the previous director<br/> 16 had a short tenure. At this precise moment I<br/> 17 don't remember who preceded her, but it states<br/> 18 here that my immediate predecessor lasted only<br/> 19 18 months in the position here in this document.<br/> 20 Q. Okay. You can put that document to<br/> 21 the side. I just want to ask you -- I want to<br/> 22 go back to when we were talking about damages<br/> 23 and the costs to the city, and when I asked if<br/> 24 you could trace any of the costs to, for<br/> 25 instance, CVS, you said that's not in my</p> |

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| <p style="text-align: right;">Page 318</p> <p>1 purview. What do you mean by that?</p> <p>2 A. It's not in my purview. I don't --</p> <p>3 I don't -- I don't know that it does or doesn't.</p> <p>4 It's not something that I know.</p> <p>5 Q. Okay. And it's not something you've</p> <p>6 tried to figure out?</p> <p>7 A. No.</p> <p>8 MR. RUIZ: Then I would like to just</p> <p>9 join the other questioners earlier today who</p> <p>10 said that we object to the late production of</p> <p>11 documents, which I did not receive until after I</p> <p>12 got off the plane yesterday, and I'd like to</p> <p>13 reserve the opportunity to recall you. But</p> <p>14 other than that, I am -- I have no further</p> <p>15 questions.</p> <p>16 MR. PIFKO: Does anyone -- before we</p> <p>17 go off the record, does anyone else have</p> <p>18 questions?</p> <p>19 All right. We're going to go off</p> <p>20 the record. I don't think we have any</p> <p>21 questions, but I just want to talk to my</p> <p>22 colleagues real quick.</p> <p>23 THE VIDEOGRAPHER: Off the record,</p> <p>24 6:45.</p> <p>25 (Recess had.)</p> | <p style="text-align: right;">Page 320</p> <p>1</p> <p>2 Whereupon, counsel was requested to give instruction</p> <p>3 regarding the witness' review of the transcript</p> <p>4 pursuant to the Civil Rules.</p> <p>5</p> <p>6 SIGNATURE:</p> <p>7 Transcript review was requested pursuant to the</p> <p>8 applicable Rules of Civil Procedure.</p> <p>9</p> <p>10 TRANSCRIPT DELIVERY:</p> <p>11 Counsel was requested to give instruction regarding</p> <p>12 delivery date of transcript.</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <p style="text-align: right;">Page 319</p> <p>1 THE VIDEOGRAPHER: Back on the</p> <p>2 record. The time is 6:49.</p> <p>3 MR. PIFKO: We don't have any</p> <p>4 questions for the reasons we stated at the</p> <p>5 beginning of the record. Among other things, we</p> <p>6 believe there's no further basis to recall the</p> <p>7 witness. So that concludes the deposition. And</p> <p>8 we reserve the right to review and sign the</p> <p>9 transcript.</p> <p>10 THE VIDEOGRAPHER: We're off the</p> <p>11 record. The time is 6:50.</p> <p>12</p> <p>13 (Deposition concluded at 6:50 p.m.)</p> <p>14 -----</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>                                                                                                                                                                                                                                                                                                                                                                                                       | <p style="text-align: right;">Page 321</p> <p>1 REPORTER'S CERTIFICATE</p> <p>2 The State of Ohio, )</p> <p>3 ) SS:</p> <p>4 County of Cuyahoga. )</p> <p>5</p> <p>6 I, Renee L. Pellegrino, a Notary Public</p> <p>7 within and for the State of Ohio, duly commissioned</p> <p>8 and qualified, do hereby certify that the within</p> <p>9 named witness, MERLE GORDON, was by me first duly</p> <p>10 sworn to testify the truth, the whole truth and</p> <p>11 nothing but the truth in the cause aforesaid; that</p> <p>12 the testimony then given by the above referenced</p> <p>13 witness was by me reduced to stenotypy in the</p> <p>14 presence of said witness; afterwards transcribed,</p> <p>15 and that the foregoing is a true and correct</p> <p>16 transcription of the testimony so given by the above</p> <p>17 referenced witness.</p> <p>18 I do further certify that this deposition</p> <p>19 was taken at the time and place in the foregoing</p> <p>20 caption specified and was completed without</p> <p>21 adjournment.</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p> |

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| <p style="text-align: right;">Page 322</p> <p>1 I do further certify that I am not a</p> <p>2 relative, counsel or attorney for either party, or</p> <p>3 otherwise interested in the event of this action.</p> <p>4 IN WITNESS WHEREOF, I have hereunto set my</p> <p>5 hand and affixed my seal of office at Cleveland,</p> <p>6 Ohio, on this 24th day of July, 2018.</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11 </p> <p>12 Renee L. Pellegrino, Notary Public</p> <p>13 within and for the State of Ohio</p> <p>14</p> <p>15 My commission expires October 12, 2020.</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>                                                                                                                                                                                                                                                                                                                                                                                                                                   | <p style="text-align: right;">Page 324</p> <p>1 DEPOSITION REVIEW</p> <p>2 CERTIFICATION OF WITNESS</p> <p>3 ASSIGNMENT REFERENCE NO: 2959486</p> <p>4 CASE NAME: In Re: National Prescription Opiate Litigation</p> <p>5 DATE OF DEPOSITION: 7/19/2018</p> <p>6 WITNESS' NAME: Merle Gordon</p> <p>7 In accordance with the Rules of Civil</p> <p>8 Procedure, I have read the entire transcript of</p> <p>9 my testimony or it has been read to me.</p> <p>10 I have made no changes to the testimony</p> <p>11 as transcribed by the court reporter.</p> <p>12</p> <p>13 Date <u>Merle Gordon</u></p> <p>14 Sworn to and subscribed before me, a</p> <p>15 Notary Public in and for the State and County,</p> <p>16 the referenced witness did personally appear</p> <p>17 and acknowledge that:</p> <p>18 They have read the transcript;</p> <p>19 They signed the foregoing Sworn</p> <p>20 Statement; and</p> <p>21 Their execution of this Statement is of</p> <p>22 their free act and deed.</p> <p>23</p> <p>24 I have affixed my name and official seal</p> <p>25 this _____ day of _____, 20____.</p> <p>_____</p> <p>Notary Public</p> <p>_____</p> <p>Commission Expiration Date</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <p style="text-align: right;">Page 323</p> <p>1 Veritext Legal Solutions</p> <p>2 1100 Superior Ave</p> <p>3 Suite 1820</p> <p>4 Cleveland, Ohio 44114</p> <p>5 Phone: 216-523-1313</p> <p>6 July 24, 2018</p> <p>7 To: Mark Pifko, Esq.</p> <p>8 Case Name: In Re: National Prescription Opiate Litigation v.</p> <p>9 Veritext Reference Number: 2959486</p> <p>10 Witness: Merle Gordon Deposition Date: 7/19/2018</p> <p>11 Dear Sir/Madam:</p> <p>12 Enclosed please find a deposition transcript. Please have the witness</p> <p>13 review the transcript and note any changes or corrections on the</p> <p>14 included errata sheet, indicating the page, line number, change, and</p> <p>15 the reason for the change. Have the witness' signature notarized and</p> <p>16 forward the completed page(s) back to us at the Production address</p> <p>17 shown</p> <p>18 above, or email to production-midwest@veritext.com.</p> <p>19 If the errata is not returned within thirty days of your receipt of</p> <p>20 this letter, the reading and signing will be deemed waived.</p> <p>21 Sincerely,</p> <p>22 Production Department</p> <p>23</p> <p>24</p> <p>25 NO NOTARY REQUIRED IN CA</p> | <p style="text-align: right;">Page 325</p> <p>1 DEPOSITION REVIEW</p> <p>2 CERTIFICATION OF WITNESS</p> <p>3 ASSIGNMENT REFERENCE NO: 2959486</p> <p>4 CASE NAME: In Re: National Prescription Opiate Litigation</p> <p>5 DATE OF DEPOSITION: 7/19/2018</p> <p>6 WITNESS' NAME: Merle Gordon</p> <p>7 In accordance with the Rules of Civil</p> <p>8 Procedure, I have read the entire transcript of</p> <p>9 my testimony or it has been read to me.</p> <p>10 I have listed my changes on the attached</p> <p>11 Errata Sheet, listing page and line numbers as</p> <p>12 well as the reason(s) for the change(s).</p> <p>13 I request that these changes be entered</p> <p>14 as part of the record of my testimony.</p> <p>15</p> <p>16 I have executed the Errata Sheet, as well</p> <p>17 as this Certificate, and request and authorize</p> <p>18 that both be appended to the transcript of my</p> <p>19 testimony and be incorporated therein.</p> <p>20</p> <p>21 Date <u>Merle Gordon</u></p> <p>22 Sworn to and subscribed before me, a</p> <p>23 Notary Public in and for the State and County,</p> <p>24 the referenced witness did personally appear</p> <p>25 and acknowledge that:</p> <p>26 They have read the transcript;</p> <p>27 They have listed all of their corrections</p> <p>28 in the appended Errata Sheet;</p> <p>29 They signed the foregoing Sworn</p> <p>30 Statement; and</p> <p>31 Their execution of this Statement is of</p> <p>32 their free act and deed.</p> <p>33 I have affixed my name and official seal</p> <p>34 this _____ day of _____, 20____.</p> <p>35 _____</p> <p>Notary Public</p> <p>_____</p> <p>Commission Expiration Date</p> |

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| <div data-bbox="769 153 852 180" data-label="Page-Header"><p>Page 326</p></div> <div data-bbox="248 184 847 1031" data-label="Text"><p>1           ERRATA SHEET<br/>2           VERITEXT LEGAL SOLUTIONS MIDWEST<br/>3           ASSIGNMENT NO: 7/19/2018<br/>4 PAGE/LINE(S) /     CHANGE     /REASON<br/>5 _____<br/>6 _____<br/>7 _____<br/>8 _____<br/>9 _____<br/>10 _____<br/>11 _____<br/>12 _____<br/>13 _____<br/>14 _____<br/>15 _____<br/>16 _____<br/>17 _____<br/>18 _____<br/>19 _____<br/>20 Date           Merle Gordon<br/>21 SUBSCRIBED AND SWORN TO BEFORE ME THIS _____<br/>22 DAY OF _____, 20_____.<br/>23 _____<br/>24           Notary Public<br/>25 _____<br/>              Commission Expiration Date</p></div> <td data-bbox="857 140 1481 1039"></td> |  |
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## [question - recall]

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[sorry - square]

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[submitted - talk]

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[talk - third]

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[third - transition]

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Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.

THE ABOVE RULES ARE CURRENT AS OF SEPTEMBER 1, 2016. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

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COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

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